

1                   IN THE UNITED STATES DISTRICT COURT

2                   FOR THE DISTRICT OF OREGON

3	SUZANNE IVIE,	)	
		)	
4	Plaintiff,	)	3:19-cv-01657-JR
		)	
5	vs.	)	June 16, 2021
		)	
6	ASTRAZENECA PHARMACEUTICALS, LP,	)	Portland, Oregon
		)	
7	Defendant.	)	

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10                   (Jury Trial - Volume 3)

11                   BEFORE THE HONORABLE JOLIE A. RUSSO

12                   UNITED STATES DISTRICT COURT MAGISTRATE

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(June 16, 2021)

P R O C E E D I N G S

(Open court; jury present:)

THE COURT: Good morning. Please be seated.

Thank you for your prompt attendance this morning.

We really appreciate it.

Ms. Belknap, a reminder that you are and continue to be under oath now.

THE WITNESS: Thank you.

THE COURT: Defense counsel, please proceed.

CROSS-EXAMINATION

BY MS. RIECHERT:

Q Ms. Belknap, are you currently employed?

A No.

Q Did you used to work for AstraZeneca?

A Yes, I did.

Q For how long?

A A little over 13 years.

Q When did you leave AstraZeneca?

A May 3rd, 2019.

Q Why did you leave?

A I retired.

Q So what did you do for AstraZeneca?

A I was a senior employment practices partner.

Q By the way, how long have you lived in Texas -- I didn't

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1 even ask where you live. Where do you live?

2 A In Flower Mound, Texas; part of Dallas.

3 Q How long have you lived there?

4 A 36 years.

5 Q So you were explaining your role when you worked at  
6 AstraZeneca. Could you tell us a little bit more about that  
7 role.

8 A Sure. Employee practices was a specialty group of the  
9 human resources organization, and we specialized in managing  
10 all employee relations issues for our assigned client group.  
11 That meant that any time a manager had a concern about the  
12 performance of an employee, we'd provide advice and counsel on  
13 how to manage for that. Then also, if there were any policy  
14 violations, misconduct, misbehavior, we would conduct  
15 investigations into that and form a conclusion.

16 Q And when you worked for AstraZeneca doing this work in  
17 employee relations, did you do that out of Texas?

18 A Yes.

19 Q Do you have a college degree?

20 A Yes, I do.

21 Q And where did you get your degree and what was it in?

22 A The degree in business communications from the University  
23 of Arkansas at Longfellow.

24 Q Do you have any post-college education?

25 A I do. I don't have a post-degree, but I did take some

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1 courses after I received my bachelor's degree, yes.

2 Q And what were those courses in?

3 A Employment law basically or in human resources.

4 Q Do you have any certifications?

5 A I had a certification with SHRM, the Society of Human  
6 Resources Management.

7 Q What did you have to do to get that certification?

8 A You have to take a test. You have to have so many years  
9 in human resources, what they consider an exempt level, which  
10 basically is a management position.

11 Q And when did you get that Society of Human Resources  
12 professional certification?

13 A That was in the early '90s. I think '92 is what we  
14 established yesterday.

15 Q Are you currently married?

16 A Yes.

17 Q Can you explain how the employee relations department  
18 differs from the human resources business partner job?

19 A Sure. The business partners are more aligned with the  
20 business. They are more involved with business development,  
21 organizational development. Employee relations is a  
22 specialized group that we specialize just in employee relations  
23 matters. We work closely with them to let them know about  
24 investigations or things that we are working on, but we are not  
25 as closely aligned to the business as they are.

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1 Q And Amy Welch, which we heard from earlier, she was a  
2 human resources business partner?

3 A That's correct.

4 Q Have you worked your whole career since college in human  
5 resources?

6 A Yes.

7 Q Now, first, did you support Suzanne Ivie when she -- when  
8 you were both at AstraZeneca?

9 A Yes. She was in my client group, yes.

10 Q She was a manager; is that correct?

11 A That's correct.

12 Q And then did she have people who reported to her?

13 A She had professional sales reps that reported to her, yes.

14 Q If those employees -- if she had issues with those  
15 employees, would they come to you about those issues?

16 A Yes. For the time she was in my client group, yes.

17 Q Then what would you do when she came to you with issues  
18 about the employees that she was supervising?

19 A Obviously talk with her about the concerns; provide advice  
20 to her on the most appropriate way to handle those issues.

21 Q Just as you did with Ms. Ivie, if she was having concerns  
22 with people reporting to her, did you support Ms. DiNunzio if  
23 she had people who reported to her if she had concerns?

24 A That's correct.

25 Q Was Ms. Ivie one of the people who reported to

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1 Ms. DiNunzio who Ms. DiNunzio came to you with concerns about?

2 A That's right.

3 Q And what were the concerns that Ms. DiNunzio had about  
4 Ms. Ivie?

5 A That it appeared that she was not working full days in the  
6 field; not going out in the field working. She was doing more  
7 virtual coaching from her home instead of actually going out in  
8 the field and working one-on-one with the sales reps.

9 Q Did she have concerns about the field coaching reports?

10 A Yes.

11 Q Do you remember what those concerns were about?

12 A That she was completing field coaching reports, when she  
13 had not actually been in the field with that person.

14 Q And did she tell you what she had done or how she found  
15 out about these concerns?

16 A The commercial business director, which Ms. DiNunzio's or  
17 Stephani's title, receives reports from, I believe it is the  
18 corporate commercial learning and development group. That will  
19 give us the average number of field days. So she had received  
20 that report and was looking over that and saw that there was a  
21 low number for Suzanne.

22 Q Did she also tell you that she looked at expense reports?

23 A Once she saw that there was a low number for Suzanne, she  
24 then looked at the expense reports and saw that there was  
25 limited travel for Suzanne for -- in particular for the Boise,



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1 Idaho, part of her region.

2 Q I'm going to show you Exhibit 501.

3 A Okay.

4 Q I know there is a lot of writing here and it's hard to  
5 read.

6 A Yes.

7 Q There we go.

8 Is this a copy of an email that Ms. DiNunzio sent to  
9 you summarizing the concerns that she had about Ms. Ivie?

10 A That's correct. We had a call on February 15th, and I had  
11 requested her to send me information so that I could review it.

12 Q Now, when a manager comes to you about concerns about the  
13 performance of an employee, are there certain situations when  
14 that results in an EthicsPoint being set up?

15 A That's correct.

16 Q And when is an EthicsPoint opened up?

17 A A lot of times we don't open those up right away. I know  
18 when I got this, I was traveling. I was actually in the  
19 airport when I had this call with Stephani. So at some point,  
20 as we start the investigation, or sometimes it's near the end  
21 of the investigation when we're about to close it out, just to  
22 make sure we have documentation recorded in the system.

23 Q And did you open up an EthicsPoint when Ms. DiNunzio  
24 expressed concerns to you about Ms. Ivie not doing field  
25 coaching as required?

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1 A I definitely opened it up right away. I actually had to  
2 tell Stephani -- well, I knew I needed to delay a little bit  
3 because I knew we received these other allegations about  
4 Suzanne. We were starting our investigation into that. So I  
5 delayed Stephani on getting started on her concerns because of  
6 that investigation going on. So I told her it was a lot of  
7 data that I would need to look at, and it would take me some  
8 time to do that. So I did not open it in January. I opened it  
9 up in early February when I got back with Stephani again, as I  
10 started that investigation.

11 Q Let's look at Exhibit No. 91. Looking at Exhibit 91, is  
12 this the EthicsPoint that you opened up when Ms. DiNunzio  
13 raised concerns about Ms. Ivie and her field coaching?

14 A Yes. This appears to be the case.

15 Q If you could go to page 3, middle of the page.

16 A Yes.

17 Q Under the word "Next," it should show up.

18 A That's right.

19 Q It says, "2-7-19." Can you explain what happened on  
20 2-7-19. Just read what it says and then explain what you  
21 meant.

22 A Well, this is where I got back with Stephani. I had a  
23 conversation with Stephani again and reviewed the concerns. As  
24 I said, I kind of stalled her a little bit in getting started  
25 with the investigation because of the other investigation that

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1 was going on. So we just reviewed all of her concerns again.  
2 She had provided data to me, so I had a chance to look through  
3 that by that time.

4 Q So it says, "No. 1. Large variance between the number of  
5 FCRs recorded in Veeva and the amount of coaching days  
6 available; there should be many more FCRs."

7 What did you mean by that?

8 A FCR is the field coaching form.

9 Q What is Veeva?

10 A Veeva is a sales tool that managers use, all of the sales  
11 reps use to record their call, but managers use to log their  
12 field coaching reports in.

13 Q All right. So what was your understanding of No. 1?

14 A No. 1 is that there were not enough field coaching forms  
15 to match the number of days that Suzanne should have been in  
16 the field.

17 Q And then No. 2: "Possibly entered her coaching time in  
18 Veeva to account for the 150 required coaching days but does  
19 not have the FCRs to support the coaching time she recorded."

20 What did you mean by that?

21 A That's what Stephani provided to me; that there was a  
22 discrepancy in the number of days required and the number of  
23 field coaching forms that she had entered into Veeva.

24 Q Then it goes on to say, "It's important to note that  
25 DSMs" -- that's district sales managers -- "are required to

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1 record their time in Veeva (see FAQ attachment). There is no  
2 default. DSMs have to pick an action for each day."

3 Was that what Stephani told you?

4 A Yes.

5 Q Then there were seven options to record time: Coaching  
6 with customer engagement should be 80 percent of coaching;  
7 coaching without customer engagement can be up to 20 coaching;  
8 business development; home office time; HQ branding training;  
9 interview; and vacation or sick day.

10 Is that what Stephani told you?

11 A Yes.

12 Q Recording DSM coaching time in Veeva does not generate an  
13 FCR. It simply counts coaching time.

14 That's, again, what Stephani told you?

15 A Yes.

16 Q No. 3. Several instances where more than one FCR was  
17 completed for the same day.

18 Did you understand what Stephani meant when she told  
19 you that?

20 A That's reporting what Stephani told me. I probably knew  
21 what that was at the time. I struggle today to remember  
22 exactly what that was.

23 Q Then No. 4, FCRs being utilized to document brief distance  
24 coaching discussions and follow-up conversations.

25 Again, that's what Stephani is reporting to you?

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1 A Yes. I remember that.

2 Q Then No. 5, poor quality of field coaching reports; lack  
3 of observations of HCP -- that's healthcare professional  
4 interactions. This is related to No. 4. "My concern is that  
5 she is coaching from her home office."

6 Again, that's what Stephani is reporting to you?

7 A That's right.

8 Q No. 6, only 42 percent of her field coaching reports are  
9 in completed status, meaning that the sales professional read  
10 and acknowledged the report.

11 That's, again, what Stephani is telling you?

12 A Yes.

13 Q No. 7, lack of live coaching in Boise; tab 2 of the  
14 spreadsheet. Her flights and hotels don't account for the  
15 number of FCRs she has in the system. She only has a flight or  
16 hotel for 45 percent of her FCRs in that territory.

17 Again, that's what she is telling you?

18 A Yes.

19 Q Did these sound like serious concerns to you?

20 A Yes, they were.

21 Q Okay. If you continue on down, I think it says  
22 "recommended"?

23 A Yes. After reviewing the data, yes.

24 Q Then it says, "Recommended an OTR be held with Ivie."

25 What's an OTR in AstraZeneca speak?

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1 A That stands for "opportunity to respond." So actually it  
2 is an interview with an individual to give them an opportunity  
3 to tell their side of the story.

4 Q And did you meet with Ms. DiNunzio and Ms. Ivie to have  
5 this OTR?

6 A Yes. It looks like that was on February 18th.

7 Q Is it typical to have the manager and the employee  
8 together for that OTR?

9 A It is.

10 Q Why is that -- that you have them both together?

11 A Because the manager is the most knowledgeable about the  
12 situation; the most knowledgeable about what the requirements  
13 are. So it is very typical that they are there. They are the  
14 ones who have the concerns. So it is typical that the manager  
15 is there and in most situations leads the questions, and then I  
16 may ask follow-up questions, but I'm there to listen as well.

17 Q Then it goes on, "On 2-18-19, OTR with Ivie."

18 Is what we are looking at now the notes of that  
19 meeting that you had with Ms. Ivie and Ms. DiNunzio on  
20 February 18th, 2019?

21 A Yes.

22 Q So tell us what you can recall from that meeting.

23 A I remember after Stephani explained what the concerns  
24 were, Suzanne first responded that she was not aware of the  
25 expectation of the 80 percent in the field; 20 percent virtual.

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1 Then Stephani explained that had been covered with Suzanne -- I  
2 think referenced some emails or when that had been explained to  
3 Suzanne and then the rest of the field sales and what that  
4 expectation was.

5 I recall that Suzanne then said that she wasn't  
6 traveling because she thought there were budget constraints,  
7 and I remember Stephani saying, no, there were not budget  
8 constraints on actually going out into the field.

9 I remember that Suzanne said -- backing up just a  
10 moment. Suzanne, as an executive DSM, was on special projects,  
11 and I remember her saying that she thought some of these  
12 special projects were taking time away from her ability to go  
13 out into the field.

14 Q And what were these special projects? Do you remember?

15 A She was the compliance ambassador for the team. I believe  
16 one was called Women in Leadership. I'm not exactly sure what  
17 all that entailed. I believe she was on the committee that was  
18 developing a meeting that was going to be held in March of that  
19 year for all of the sales managers for the respiratory  
20 division. It was called the Leadership Academy. So she was on  
21 that committee putting that leadership academy program  
22 together.

23 Q Did Ms. Ivie have an explanation for why she was not  
24 traveling to Boise?

25 A Her explanation was that she thought there were budget

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1 constraints.

2 Q Did she saying anything about making pharmacy calls?

3 A Right. When we asked her how she was spending her day, we  
4 went through how many field coaching reports forms there were,  
5 how many days in the field she indicated she had made. Then  
6 there were many days where there was no one record of her  
7 working in the field or field coaching forms.

8 We asked her how she was spending her time. One  
9 thing she said she was out making pharmacy calls. That is  
10 something that sales reps do, and she said it was so it would  
11 free up time for her sales reps. That's not something that a  
12 DSM typically does.

13 There were some days, I recall, that she had no  
14 explanation as to what she was doing.

15 Q Were you concerned about what Ms. Ivie said at the  
16 meeting?

17 A I was.

18 Q Why were you concerned?

19 A Well, No. 1, I was concerned that she said -- she didn't  
20 know about the 80/20 rule. She should have known about that if  
21 she was reading her emails or paying attention on conference  
22 calls. She should have known that. So that was a concern.

23 Q Any other concerns that you had?

24 A A concern that she couldn't explain some of the days; a  
25 concern that she said she was out making pharmacy calls; a



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1 concern that these are the projects that were taking time away  
2 from her, and that if that was the situation, she should have  
3 gone with Stephani to say, "I need help. I need to step back  
4 from some of these special projects," when she was struggling  
5 getting into the field.

6 Q So what did you do after this discussion with Ms. Ivie and  
7 Ms. DiNunzio?

8 A I'm sure I looked at some records that Stephani sent me,  
9 the emails explaining the 80/20 expectation that came out from  
10 the sales leaders. I think there was an email where Stephani  
11 forwarded that on to her managers. I believe I had -- I was  
12 reviewing things with my department, Stephani's manager, and I  
13 believe his response was there were no budget constraints that  
14 meant you did not go into the field.

15 Q Do you also get memos about budget constraints when you  
16 worked at AstraZeneca?

17 A I did.

18 Q What was your understanding of what the purpose of  
19 communicating these budget constraints to you was?

20 A We needed to be prudent with our travel. First of all, it  
21 was my understanding that there were no expectation that field  
22 salespeople did not continue to travel out in the field for  
23 field coaching days; that if we did need to travel, we would be  
24 careful. We would need to book flights as far in advance as we  
25 could to get a cheaper airfare. We would stay in lower rate

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1 hotels. I think there was a cap maybe on the dollar amount.  
2 We wouldn't have large, expensive meals, and so basically just  
3 be prudent with AstraZeneca's money.

4 Q So you mentioned some emails from Ms. DiNunzio. Could you  
5 look at Exhibit 502.

6 A Okay.

7 Q Is this one of the emails that Ms. DiNunzio sent to you  
8 after you had that meeting with Ms. Ivie and Ms. DiNunzio?

9 A Yes, I believe so.

10 Q And what is she telling you in this email?

11 A She is recapping for me, and I believe we had talked about  
12 this before. She is recapping for me that the two reps up in  
13 Idaho, Ben and Sam, were both receiving two ratings for the  
14 year. So that's a low rating. Our scale is one to five. So a  
15 two is a low. So that meant those two sales reps were not  
16 meeting their sales goals. As a result of that, they would not  
17 be receiving large merit increase or 100 percent of their  
18 bonuses because of this low rating.

19 Q What else, continuing on?

20 A That she was -- based on the analysis that Stephani had  
21 done, flight and hotels, that she was in the field only about  
22 45 percent of the time versus the 80 percent rule. So that  
23 meant that 55 percent of the field coaching forms she filled  
24 out were virtual, and she was saying she was sitting at home  
25 coaching people on the phone.

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1 Q Then the next bullet point?

2 A The next is discussion about coaching. That had been  
3 covered with her on June 15th, 2018, that the 80/20 rule, I  
4 believe, and also she asked her not to fill out field coaching  
5 forms if she was just having phone calls with those reps.

6 Q Then the one, a snip from the behavioral section of her  
7 year-end review.

8 A It reflects that we had several discussions about projects  
9 and initiatives interfering with her primary responsibilities.  
10 So, yes, one of the 2019 actions is to limit her involvement in  
11 one project.

12 Q To one project?

13 A To one project. I'm sorry. That's right.

14 Q And does that relate to what you mentioned with all these  
15 different activities that she was doing that Ms. DiNunzio felt  
16 was taking away from her time coaching?

17 A That's correct.

18 Q And then if we could go to the second page.

19 A Okay.

20 Q This is additional information that Stephani -- that  
21 Ms. DiNunzio forwarded to you on the day of the OTR?

22 A That's right.

23 Q And at the very end --

24 A Yes.

25 Q And then if we could go back to -- what was your reaction,

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1 first of all, to this email from Ms. DiNunzio?

2 A Well, it matched what she had said in the OTR; that she  
3 had coached Suzanne around these matters, and they did not  
4 improve.

5 Q And what's on top now is one of the notes from the  
6 June 15th, 2018, meeting between Ms. DiNunzio -- I think that's  
7 the one you referenced where she said she had told her not to  
8 use --

9 A That's right.

10 Q -- field coaching reports?

11 A And she continued to do that. That's right.

12 Q Let's look at Exhibit 503. Looking at Exhibit 503, is  
13 this the second email that Ms. DiNunzio sent to you and  
14 Ms. Welch the day after the OTR, February 19th, with respect to  
15 the discussion with Ms. Ivie on the 18th?

16 A That is right. This was her summary and her thoughts  
17 after the conversation.

18 Q Then does she go through the three reasons that Ms. Ivie  
19 gave in the OTR for the lack of field coaching?

20 A Yes.

21 Q And the first reason that Ms. Ivie had given was that she  
22 was unaware that she had to spend 80 percent of her time with  
23 customer engagement, and then Ms. DiNunzio sends you the proof  
24 that Ms. Ivie knew that she had to spend 80 percent?

25 A Or she should have known that, that's correct.

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1 Q Then No. 2 is Suzanne stated that she engaged in virtual  
2 field rides due to budgetary constraints, and that's the other  
3 explanation she gave. Then Ms. DiNunzio tells you that she has  
4 never asked any member of her team to decrease their field  
5 rides because of a travel budget; that several members of the  
6 team travel several times a month to engage in field rides?

7 A That's right.

8 Q Reason No. 3 is she was challenged to do these field rides  
9 because of competing priorities; that was these extra  
10 activities she was doing, correct?

11 A That's correct.

12 Q Then Ms. DiNunzio tells you that she has had many  
13 conversations about these projects and initiatives with  
14 Ms. Ivie. She is repeatedly stating -- Ms. Ivie states that  
15 she enjoys the projects, and they don't interfere with her core  
16 responsibilities, but Ms. DiNunzio remains concerned about the  
17 lack of action that was in the review?

18 A That's right.

19 Q And then she says she removed her from the women in  
20 leadership core team last year, so that would be 2018?

21 A Yes.

22 Q Then during the conversation with you, Ms. Ivie stated she  
23 had been nominated for several projects. Ms. DiNunzio says, "I  
24 only nominated her to the leadership academy, and that was in  
25 Q2 before the concerns about her activity. I believe we should

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1 remove her from this team before we give her a highly visible  
2 platform next month."

3 A That's correct.

4 Q So what was the conclusion that you reached after  
5 receiving these emails and having this OTR?

6 A Based on this information that Stephani sent, based on  
7 Suzanne's responses, Suzanne did not provide any additional  
8 information regarding why she thought there were budget  
9 concerns, and so I recommended a first written warning. This  
10 was a moderate -- what we would consider a moderate violation  
11 of policy, not working in the field. We wanted to get  
12 Suzanne's attention since Stephani had had several  
13 conversations with her that still had not improved. So we  
14 wanted to get her attention, and I recommended a first written  
15 warning.

16 Q And why did you recommend that?

17 A I thought that was the appropriate level of discipline. I  
18 thought that should get Suzanne's attention that this is a  
19 serious matter. It had been discussed with her. She had not  
20 improved, so that's why I recommended the first written  
21 warning.

22 Q Did you speak to Ms. Ivie and tell her that you were going  
23 to recommend putting her on a first written warning?

24 A I did.

25 Q Can we go back to Exhibit 91, the conversation on 2-25.

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1 If you look on 2-25, it says, "Ivie was informed she was being  
2 placed on a WW" -- a written warning?

3 A Yes.

4 Q "Ivie asked if MC severance" -- more AstraZeneca speak.  
5 What's an MC?

6 A A MC is a mutual consent. So that's a severance package  
7 that we use at AstraZeneca for people who leave the  
8 organization except through job elimination. So it is a  
9 separate severance from a job elimination package.

10 Q She asked if this MC severance would be available for her?

11 A Yes.

12 Q "EPP"?

13 A That's me -- employment practices partner.

14 Q "Received approval from legal and HRBPs."

15 A Human resources business partners, and so that would have  
16 been Amy Welch.

17 Q "And to provide MC, if that is what Ivie wanted. EPP sent  
18 MC information to Ivie."

19 A Yes.

20 Q So did you send the severance information to Ms. Ivie?

21 A I did. I sent her an email message outlining what the  
22 severance package would entail; how much she was eligible for.

23 Q If we could look at Exhibit 158, is this -- down on the  
24 bottom, is this the email that you sent to Ms. Ivie about the  
25 severance package?

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1 A Yes.

2 Q Did she get back to you with a response?

3 A There was no immediate response, and I believe I had to  
4 follow up with her -- tell her we would give her a couple of  
5 days to get back with us. I had to follow up with her, I  
6 believe, or she had some questions as well about if she took  
7 the mutual consent, would she be eligible for unemployment. I  
8 responded to her that it would be up to the state on whether or  
9 not they granted unemployment benefits to her. AstraZeneca  
10 would not contest it, if the state did grant her unemployment  
11 benefits.

12 Then I just went through some basic information that  
13 if she takes the mutual consent, it is coded in the HR system,  
14 "mutual consent" under "performance." That's the standard code  
15 within our system. We use a third-party administrator who will  
16 verify why an employee leaves the organization. So that  
17 information is fed to a third-party administrator. So they  
18 will have that information when the unemployment commission  
19 contacts them as to why and verify that we are granting this  
20 and we are not contesting the unemployment.

21 Q So on February 25th, 2019, was that when you concluded  
22 your investigation of the EthicsPoint that you had opened up  
23 about the concerns that Ms. DiNunzio had raised about Ms. Ivie?

24 A Yes.

25 Q So after this discussion with Ms. Ivie about the written



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1 warning, did an issue come up about whether Ms. Ivie was taking  
2 sick days and not recording them? Do you remember?

3 A I don't recall. Not reporting them in Veeva or -- I don't  
4 recall.

5 Q Was there a discussion about getting the materials for  
6 that conference in March that you had mentioned that Ms. Ivie  
7 was working on?

8 A Yes.

9 Q And what was discussed about that?

10 A Suzanne was responsible for conducting a survey with other  
11 DSMS -- I don't know the exact -- everything that was asked.  
12 How do you feel about your job? And I was actually on that  
13 committee as well for the Leadership Academy, because I was  
14 going to be presenting some information to the attendees.

15 Suzanne was responsible for that survey. She had the  
16 data. One of her fellow DSMS that was on this committee had  
17 asked her to send the data. We had communicated that she was  
18 not going to be -- she was no longer on the committee. I  
19 believe that had been communicated to the committee. They  
20 asked her to send the data or password so that they could get  
21 into and retrieve the data so they could finish putting  
22 together their presentation, and she was not sending that.

23 So then I believe another commercial business  
24 director, who was also on this committee, emailed Suzanne or  
25 emailed Stephani to try and get it from Suzanne, and she was

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1 still not sending that. And I believe -- maybe I sent a  
2 message to Suzanne or was about to send the message when she  
3 finally did give the password to one of her co-workers on that  
4 committee -- not a co-worker but another manager on that  
5 committee.

6 Q Was that a problem that she had not turned over this  
7 password?

8 A Yes. They would have had to create a new presentation.

9 Q Let's look at Exhibit 506. Did you send a copy of the  
10 first written warning to Ms. DiNunzio -- excuse me -- to  
11 Ms. Ivie on March 5th, 2019?

12 A Yes. Once we finally heard back from Suzanne that her  
13 decision was to stay at AstraZeneca, I then typed up the  
14 written warning and sent it to her. I'll just add, the reason  
15 I held off on doing that: With the first written penalty,  
16 there is a 25 percent reduction for her bonus for that quarter.  
17 So with her asking for the mutual consent, I held off on  
18 administering that warning and entering that into the system,  
19 because if she wanted to leave AstraZeneca, we were willing to  
20 let her go and not have that 25 percent reduction on her bonus  
21 so that she could receive the full bonus she would have been  
22 entitled to. So I waited for her decision on what she wanted  
23 to do before I typed up that letter and sent it to her.

24 Q And then what happened after you issued the written  
25 warning to her? Does that mean she went out on leave of

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1 absence?

2 A I believe she went out on a leave of absence the next day  
3 or a couple of days after that.

4 Q In your experience in human resources and employee  
5 relations, do you see people going out on leaves of absence  
6 when performance issues are being raised?

7 A Oh, yes.

8 Q Can you estimate what percentage of the time that is?

9 A Oh, 50, 60 percent. I'll just add, the pattern is they  
10 will file a complaint against their manager, or they go on  
11 leave. Sometimes it's both. They file a complaint and then  
12 they go on leave. It is a high percentage.

13 Q Then if they receive discipline, do you often see that  
14 they go out on a leave?

15 A Yes.

16 Q So when Suzanne Ivie was out on the leave, was her access  
17 to some of the AstraZeneca systems shut off?

18 A Yes. That's automatic. When it's coded in the system  
19 that they are on a leave of absence, then it automatically  
20 shuts off, I think her email access and some access to other  
21 selling tools, like maybe Veeva that the managers have access  
22 to.

23 Q So was this unique to Ms. Ivie?

24 A No.

25 Q When other people go on leave, the system access is shut

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1 off?

2 A That's correct.

3 Q And why is it that you shut off people's system access  
4 when they are out on leave?

5 A Well, we want people to -- we don't want them engaged in  
6 work. We don't want them feeling like they need to respond to  
7 emails or something else if they're contacted. We want to them  
8 to concentrate on getting better.

9 Q I would like to show you Plaintiff's Exhibit 19. Is this  
10 an email that you received from Ms. Ivie in which she is  
11 raising a concern about her system access being cut off while  
12 she was on leave?

13 A Yes.

14 Q Then your response is above that?

15 A That's right.

16 Q And you explain that this is traditionally what happens at  
17 AZ when you go out on leave?

18 A That's right.

19 Q All right. So now let's turn to the time when Ms. Ivie  
20 returns from her leave of absence. Did you have interactions  
21 with her after she returned from her leave -- not right  
22 after -- but after she came back from her leave? Did you have  
23 any interactions with her after that?

24 A Right. I believe it was around the 25th of April, or it  
25 may have been prior to that. I don't remember the exact day.

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1 It was sometime in April. She contacted me with concerns that  
2 Stephani was asking another manager or two to retrain her. I  
3 think she may have said her employee to retrain, her but it was  
4 actually a manager. She had some questions. She thought  
5 Stephani was retaliating against her by asking her to do  
6 specific things -- to be retrained; to be recertified on  
7 something.

8 Q And were you able to answer her questions about why  
9 Ms. DiNunzio was doing these things?

10 A No. I couldn't answer that. They were more  
11 business-related questions that I didn't know the answer to,  
12 but I recommended to Stephani that -- I'm sorry -- to Suzanne  
13 that if she had questions, to ask Stephani. Then if she still  
14 had concerns, I would be happy to get on a call with her.

15 Q She is claiming that you pushed her off to Ms. DiNunzio.  
16 Was that your intent?

17 A It was not my intent to push her off, but Stephani would  
18 be the best person to answer. I mean, we expect there to be  
19 open communication between employees and their manager. So I  
20 was trying to help facilitate that again; that if she had  
21 questions, ask Stephani. That's the best person to ask.

22 Q So did you conduct an investigation into these concerns  
23 that she was being retaliated against?

24 A Yes. The first thing I did was facilitate a call with  
25 Stephani and Suzanne so that she could get the answer. Then

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1 based upon that, I didn't feel that there was any retaliation.  
2 They were basic things that a manager will do when a person  
3 returns from leave.

4 She wasn't being retrained. She was just being  
5 brought up to speed as to what she missed during the time she  
6 was on leave. I believe she had an issue. She felt it was  
7 degrading to say bring her up to speed or ask someone to bring  
8 her up to speed. That simply means, "Here is what you missed  
9 while on leave of absence. We know you didn't have access to  
10 email. Maybe you didn't have access to this." That's common,  
11 when someone goes on leave, that's what a manager will do --  
12 will ask their co-workers to bring them up to speed on what  
13 they missed.

14 Q Let's look at Plaintiff's Exhibit 94.

15 A Okay.

16 Q Tell us what this is.

17 A This is a spreadsheet I put together just outlining her  
18 allegations, the response to the allegations, and then the  
19 facts and the findings.

20 Q Let's look at the first allegation. The required number  
21 of field days increased to 160, but Ms. Ivie did not receive  
22 the email.

23 Did you investigate that?

24 A Yes. Stephani did not make that change. The company made  
25 that change. It was sent out to the executive business

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1 directors on March 25th. That's while Suzanne was on leave.  
2 That's with why she did not receive that email.

3 Q Did you conclude whether there was any retaliation or  
4 discrimination as a result in the increase of number of field  
5 days to 160?

6 A I concluded that there was no retaliation; that that was a  
7 corporate or sales initiative. It was not Stephani's  
8 requirement.

9 Q Did you get the actual email that had been sent out  
10 notifying the field of these increased requirements?

11 A Yes. In that third column. It says it's from U.S.  
12 Field Tool. So that is where it was communicated on  
13 March 25th.

14 Q Go to the next page. That's the rest of that email.  
15 Let's look at issue No. 2.

16 Ms. Ivie is not allowed to use the 30 days of field  
17 coaching to everyone else. This means more travel is required  
18 for her while she is still recovering.

19 Did you look into that issue?

20 A Yes. I was familiar with this issue being part of the  
21 issue that we placed her on the first written warning for. You  
22 know, we found that she had not been in the field working, as  
23 required. It was my recommendation to Stephani that we put a  
24 pause on that virtual coaching until she could demonstrate that  
25 she could be in the field working to the expectations. So that

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1 was my recommendation, and so I did not find that was  
2 retaliation by Stephani.

3 Q The third issue that you looked into -- it is a long one.  
4 "Other DSMs in the Seattle region are being asked to train  
5 Ms. Ivie on new branding messages for different products," and  
6 then it goes on to say that she didn't get this from other  
7 places. So did you look into the issue about whether other  
8 DSMs in the Seattle region were being asked to train her on new  
9 branding messages for the different products?

10 A Yes. And Stephani provided an email that she sent out to  
11 all the managers requesting their assistance to transition  
12 Suzanne back to work and, again, explain to her what she missed  
13 while she was away. Each DSM was assigned a specific thing to  
14 review with her. It was not that she was being trained. It  
15 was just to refresh her memory or go over things that had  
16 happened while she was away.

17 Q The next page, I think at the bottom of the email,  
18 Ms. DiNunzio says, "Thanks for pitching in to make sure that  
19 Suzanne has everything she needs to lead and coach her team."

20 A That's right.

21 Q Let's look at issue No. 4. "Ms. Ivie complained she had  
22 to be trained and take an assessment on a new disease state  
23 before she coach her PSSs but others have not had to do the  
24 same thing."

25 Did you look into that issue?



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1 A Yes. So training and assessment on a new disease state is  
2 a requirement by the company. So every manager would have had  
3 to have gone through that, and the expectation is that their  
4 sales director would complete that assessment.

5 Q So did you find that was discriminatory or retaliatory?

6 A I did not. I found that was customary.

7 Q Let's look at the fifth issue that Ms. Ivie raised.

8 "Ms. Ivie is claiming she is being subjected to higher scrutiny  
9 and all the developmental opportunities have been removed. She  
10 must now send a weekly calendar so that Stephani knows where  
11 she is at all times."

12 Did you look at that issue?

13 A I did. Again, I knew about Suzanne being removed from the  
14 special projects, and that was because she mentioned in her  
15 opportunity to respond that it was taking up too much of her  
16 time. So I knew about that. That had happened before, so I  
17 did not feel that was in retaliation for her having taken leave  
18 or bringing forward a complaint.

19 Q The sick issue. Ms. Ivie complained that she is going to  
20 be trained on analytics and coaching by a subordinate who she  
21 trained and who has minimal experience."

22 Did you look into that issue?

23 A Yes. So it was not a subordinate at the time. So it was  
24 Chris Thomsen that was assigned that as part of the transition.  
25 He was not a subordinate. He was in the DSM position. He was

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1 at that time a co-worker or peer to Suzanne. At one time he  
2 was a PSS under her. But he was a DSM at the time, and I  
3 believe he continues to be a DSM.

4 Q And did you find that it was retaliatory or discriminatory  
5 for Ms. DiNunzio to ask Mr. Thomsen to help out Ms. Ivie?

6 A No. He was on the management team and assigned a task,  
7 just like all the other managers.

8 Q The seventh issue she raised is Ms. DiNunzio told her that  
9 she had no recourse against the written warning. Ms. DiNunzio  
10 was told by Ms. Welch that she was required to allow  
11 intermittent leave. Ms. Ivie says that Ms. DiNunzio is hostile  
12 and concerning.

13 Did you look into that issue?

14 A I believe I talked to Stephani about it. Stephani stated  
15 that she did not tell her that; that she had no recourse. I  
16 believe I covered that with Suzanne; that if she wanted to  
17 contest the written warning or didn't agree with it, that she  
18 could file an appeal, and that would go to my boss in employee  
19 relations.

20 Q Who was your boss?

21 A Charlene Kellum Jackson.

22 Q Did you conclude that concern was retaliatory or  
23 discriminatory?

24 A That's correct.

25 Q That it was or was not?

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1 A Was not.

2 Q The eighth issue that you looked into was Ms. Ivie was  
3 concerned that two salespeople who reported to her have been  
4 added to her district, but Ms. DiNunzio -- Stephani -- says she  
5 is not supposed to work with them. "How can I provide feedback  
6 and manage them if they are not working?"

7 Did you look into that issue?

8 A If you could scroll up to the next page. I have to  
9 refresh my memory on that one. I believe I did look into that  
10 issue. Let me read through this. I think they were hired when  
11 Suzanne was on leave. It had already been assigned to another  
12 manager to, like, onboard them. So I did not find that that  
13 was in retaliation.

14 Q Then the last -- the ninth issue that she raised,  
15 "Ms. DiNunzio told Chris Thomsen to schedule an onboarding  
16 meeting with her new hire when she knew she was coming back on  
17 April 16th. I believe Stephani did not expect her back and  
18 wants Chris to take over the district."

19 Did you investigate that?

20 A Yes. I didn't find that was in retaliation.

21 Q Did you meet with Ms. Ivie to go over the results of the  
22 investigation?

23 A I did. After we had the call on, I think it was the 25th,  
24 she mentioned that she feared retaliation -- and I told her  
25 that before we set up this call, if she still had concerns, I

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1 would set up a call with her to go over it. I believe she  
2 mentioned at the end of this call, or somewhere in the call,  
3 that she feared retaliation. So I scheduled a call with her.  
4 I think we tried to do it within a couple of days, like on the  
5 27th, but she was not available. So we then scheduled it for  
6 May 3rd.

7 Q A day that will live in infamy. May 3rd is?

8 A My retirement day.

9 Q So what happened in that call?

10 A Obviously I knew that was my last day with AstraZeneca,  
11 and I knew we needed another employment practices partner to be  
12 on that call so that I transition this to her in the event that  
13 it would have any ongoing matters.

14 We also included Amy Welch on that call as well, just  
15 to transition things. I went over the findings of the  
16 investigation. I don't remember Suzanne being very engaging on  
17 that call. I believe she said, "Okay; that's good to know,"  
18 short answers like that. She did at some point say that she  
19 feared retaliation, and I remember trying to advise her, "Don't  
20 try to predict retaliation." But I went over with her if  
21 something does happen, who she should contact. "You can  
22 contact Dawn. You can contact Amy. You can contact legal.  
23 You can contact compliance, if you feel there is something you  
24 are being retaliated for."

25 Q She says that instead of trying to help her, you scheduled

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1 a call between her and Ms. DiNunzio. Was that what you were  
2 trying to do?

3 A No. I was trying to help her. Again, if she had  
4 questions about why Stephani did some of these things, why she  
5 was asking her -- in her words -- to be retrained; if she had  
6 questions on why someone else was onboarding these employees,  
7 ask Stephani. We've got to reestablish the line of  
8 communication for them to work effectively going forward. It  
9 could not be this situation of Stephani says something to her,  
10 that she comes to an EPP or an HR business partner, and then we  
11 go find the answer and go back to Suzanne with that answer. So  
12 we did not want to be that go-between for basic questions about  
13 what was going on. Certainly we were there if she felt she was  
14 being retaliated against.

15 Q She also says that when you met with her, you told her  
16 that human resources was not there to support the employee  
17 complaints and that she needed to go straight to HR with any  
18 concerns.

19 Do you recall saying anything like that?

20 A I remember Suzanne saying to me, "I thought you were here  
21 to protect the employee." My response to her was, "I'm there  
22 to protect the company, but I'm there to make sure that all  
23 employees are treated fairly, not just the person that comes to  
24 me with a complaint." I remember saying to her, "Stephani is  
25 an employee. I am here to make sure that Stephani is treated

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1 fairly."

2           So I'm not there to side with the person that came to  
3 me first with a complaint. That's not my role. My role is to  
4 be neutral. And I also remember telling her that I follow the  
5 facts, and the facts of the investigation did not find age  
6 discrimination, retaliation -- any discrimination at all.

7 Q     She also says that you told her to move on and forget the  
8 past. Is that what you told her?

9 A     I did not say, "Forget the past." Again, I was trying to  
10 provide some counseling to her that, "For you to be successful  
11 going forward, you need to get this behind you. You and  
12 Stephani need to have open communication."

13           I had learned during part of the compliance  
14 investigation that she had been talking with one of her  
15 employees about her frustrations with Stephani, and that was  
16 causing morale issues on the team according to that employee.  
17 So that's what I was trying to get across from her. "You  
18 should not be continuing to talk about this matter; consider  
19 this matter closed. Let's move forward. If anything happens  
20 in the future, certainly come back to us, and we will help you.  
21 We will investigate that. But for now, let's try to move  
22 forward in a positive way." But the expectation was that she  
23 and Stephani were to continue working together.

24 Q     Did you feel at this time that you left that the  
25 relationship between Ms. Ivie and Ms. DiNunzio was broken?

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1 A I felt that was going to happen based on what I had seen  
2 in many other investigations. It was like irreconcilable  
3 differences. To use an analogy, it is kind of like a wife that  
4 complains about the husband not communicating, and then when he  
5 tries to communicate the complaint, he is forced or he is doing  
6 it because he has to. That's what I felt was the situation  
7 here.

8 Q Let's totally switch topics now. We are going to talk  
9 about the investigation into the December 19th, 2018,  
10 complaints against Ms. DiNunzio that it turned out was Ms. Ivie  
11 was the one who had filed these complaints?

12 A Okay.

13 Q So were you involved in investigating the complaint that  
14 came in to the company's ethics hotline on December 19th that  
15 was about Ms. DiNunzio?

16 A I was responsible for investigating those that were  
17 related to HR.

18 Q And did you come to understand that a complaint had been  
19 made the same day that Ms. DiNunzio had informed Ms. Ivie that  
20 she was going to get a bad review?

21 A Yes. I learned that afterwards.

22 Q In your experience in human resources and employee  
23 relations, do you see that employees make complaints against  
24 managers when managers are managing their performance?

25 A That's a common pattern that we see.

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1 Q Have you received training on investigations?

2 A I have.

3 Q And tell us about that training.

4 A Well, I have had multiple training on that. Then we have  
5 refresher training on investigations. Usually annually there  
6 was some refresher that is conducted for the employment  
7 practices, but basically how to conduct an investigation, yes.

8 Q And who has given you that training -- or who gave you  
9 that training?

10 A I believe some of the first training I received would have  
11 been conferences that I would have attended. I believe I  
12 received some training from outside legal counsel as well as  
13 in-house legal counsel over the years.

14 Q And how many trainings would you say you've had on HR  
15 issues and investigation over the years?

16 A All total, I would add around 20.

17 Q How often do you know get these trainings?

18 A Annually. Sometimes twice a year. Some years it was  
19 twice a year. But at least annually.

20 Q So were you involved in investigating any complaints by  
21 employees in any area of the company?

22 A If it was related to HR for my assigned client group.

23 Q What was your assigned client group?

24 A I had respiratory sales. I had part of oncology. I had  
25 part of the renal sales group.



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1 Q Approximately how many investigations a year would you say  
2 you did?

3 A I would say on average 150 a year.

4 Q Were those all related to discrimination or retaliation?

5 A No, not all of them.

6 Q So how do you conduct investigations?

7 A We start with what we call an intake. So we get the  
8 information from the person who has the concern. And based  
9 upon those concerns, we develop a plan -- who do we need to  
10 interview, what documents do we need to review or request. We  
11 generally have an opportunity to respond meeting with the  
12 employee.

13 Q And then at the end do you reach a conclusion?

14 A Yes.

15 Q And what are those conclusions? What are the choices?

16 A Well, sometimes a manager is coming forward with problems  
17 with an employee's performance. They're not meeting  
18 expectations of the job. So a conclusion there might be  
19 continued coaching, or it may mean that we would place that  
20 person on performance improvement plan. If it is related to  
21 misconduct, misbehavior, a policy violation, we would conclude  
22 if there had been a policy violation and then recommend the  
23 appropriate discipline to meet that infraction.

24 Q You said you were involved in this investigation of the  
25 hotline complaint from December. Were there any limits placed

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1 on you by AstraZeneca about what you could do in connection  
2 with that investigation?

3 A No.

4 Q Were there any limits on the witnesses you could speak to?

5 A No.

6 Q Were there any limits on the documents you could review?

7 A No.

8 Q Now, this complaint that came in to the hotline in  
9 December of 2018, did that raise two different issues?

10 A It had HR policy complaints and then also complaints about  
11 a compliance policy.

12 Q What was your role in connection with that investigation?

13 A I know I partnered with Mike.

14 Q Mike Pomponi?

15 A Yes, in compliance. We talked about the best way to go  
16 forward with the investigation, and we agreed I would be the  
17 lead on the HR piece; that he would be the lead on the  
18 compliance.

19 Q Did you decide to conduct interviews in connection with  
20 that complaint?

21 A We did.

22 Q Did you decide to do the interviews together, with both  
23 you and Mr. Pomponi interviewing the witnesses at the same  
24 time?

25 A We did. Madalina Florea also wanted to participate. She

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1 was an attorney in our compliance group. She was based in the  
2 UK. So she wanted to participate in some of those interviews  
3 as well. So based upon that -- and we were then dealing with  
4 multiple time zones. She is in the UK. That was five hours  
5 ahead of, I think, East Coast time. Mike was in the East  
6 Coast. I was Central Time in Dallas. Then we were going to be  
7 interviewing people Mountain Time and Pacific Time. So we had  
8 a short window of opportunity during the day that we could  
9 interview people. So we decided it was best for both Mike and  
10 I to be on the same call so we did not have to schedule  
11 multiple calls. Also, we were trying to be thoughtful of sales  
12 reps that we were talking to and the managers, so we weren't  
13 taking time away from the day of selling and managing people.  
14 It was all trying to be efficient.

15 Q Were you on vacation when this complaint came in?

16 A I was on vacation. Then it was going before the Christmas  
17 holiday. Then it was going into the company's shutdown, which  
18 is from Christmas to New Year's. I was delayed a little bit in  
19 more getting back to work and starting on this because my  
20 father-in-law passed away.

21 Q Did you start your investigation in relatively early  
22 January?

23 A Early January.

24 Q Did you advise Mr. Hartman of the allegations?

25 A I did. Mike Hartman. He is Stephani's boss.

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1 Q What did you tell him?

2 A I told him that we had received some allegations. I  
3 believe I told him that they contained some HR matters and some  
4 compliance matters. I told him that, based upon the  
5 information and the allegation, that we were going to have to  
6 interview probably some PSSs and the DSMs on the team. I told  
7 him that we were not going to be notifying Stephani of this  
8 right away. We wanted to try to get through some of the  
9 interviews before we notified Stephani.

10 Q And why not notify her?

11 A You know, I think just to make sure there was no  
12 discussion going on with anyone about the investigation so that  
13 she could still be free to manage her people and not feel  
14 restricted from that.

15 Q And did you tell Ms. DiNunzio about the complaint against  
16 her in December of 2018?

17 A No.

18 Q Did you tell her in January of 2019?

19 A No.

20 Q When was the first time that you told her?

21 A I believe the first time was February 21st. That was not  
22 our original timeline. However, I believe it was one of the  
23 managers who got the meeting request from compliance. They  
24 were out in the field, and it just came through on their  
25 iPhone. She didn't open it and read it. She called -- she

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1   texted Stephani and said, "Do you know why compliance is  
2   contacting me?" And if she had opened the email to read it, it  
3   would have said, "This is confidential. Do not talk with  
4   anyone about this matter."

5               So Stephani I think contacted me to say -- she may  
6   have contacted Mike. I think she contacted me to say, "Do you  
7   know why one of my managers is being contacted?"

8               At that point I had to disclose, "Well, we have  
9   received a complaint. I can't go into the specifics of it.  
10   But we will get back with you on more information, so just wait  
11   for us to get back with you. There is nothing that you need to  
12   do at this point."

13   Q     Let's look at Exhibit 525. Tell me what these are.

14   A     It looks like text messages from Suzanne.

15   Q     This is from -- the top one, "Hey, Karen. It is  
16   Stephani DiNunzio. It looks like my flight got delayed again.  
17   The San Francisco airport is horrible. I can talk now if you  
18   and Amy can. I'm sorry for the inconvenience. A quick  
19   follow-up. Does Mike know about this?"

20               Tell us what that is.

21   A     This is when she had contacted me to say, "Did you know  
22   why one of my managers is being contacted?"

23               It looks like she was contacting me about that, or I  
24   had communicated to her that we had received a complaint. She  
25   is asking if Mike Hartman knew about it, and I told her yes.

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1 She asked if she could speak with him about it, and I told her  
2 no. I told her he is aware of it, and she should not speak  
3 with him about it. And she said, "Thanks."

4 Q And that was on February 21st?

5 A Right.

6 Q Did you later interview her in connection with that  
7 complaint?

8 A Can I respond to what was down below in case anyone read  
9 that and was questioning about the 26th?

10 Q Uh-huh.

11 A "Do you expect to hear something from Suzanne?" That's  
12 related to Suzanne's decision on taking the mutual consent,  
13 because we did not tell Stephani that the complaints were from  
14 Suzanne. Let me just clarify that in case somebody read that  
15 and maybe thought that.

16 Q Did you interview Ms. DiNunzio in connection with this  
17 December 19th complaint?

18 A We did. I believe it was March the 1st.

19 Q So was the complaint that came in anonymous? I'm going  
20 back now to your interview with Ms. Ivie. Sorry. I got out of  
21 order. You interviewed Ms. Ivie in January, I think, 2019; is  
22 that correct?

23 A That's right.

24 Q So was the complaint anonymous when it came in?

25 A It was.

K. Belknap - X

1 Q So why did you decide to interview Ms. Ivie?

2 A It was a complaint that came in prior to the 12-18  
3 complaint. I think that was around the 5th. I may have gotten  
4 it on the 7th. And it was anonymous. It was referencing  
5 Suzanne. So when we got the second complaint on the 18th of  
6 December -- I think I got it on the 20th -- there was some of  
7 the same information I think related to -- someone had sent out  
8 a picture of a prescription and what they felt were  
9 unauthorized travel for a PSS. So we knew, okay, this is  
10 related to Suzanne in some way, so that's when we contacted  
11 Suzanne to say, "We received this complaint. Is there anything  
12 that you know or you want to tell us about this?"

13 Q Did you ask her if she was the person who made the  
14 anonymous complaint?

15 A No. She told us that she was.

16 Q And then you would go through the allegations with her  
17 when you interviewed her?

18 A Yes. We gave her an opportunity to just tell us anything  
19 that she needed to tell us.

20 Q And then after you interviewed Ms. Ivie, who did you  
21 decide to interview next?

22 A It was decided that we would need to interview all of the  
23 managers reporting to Stephani; that we would interview people  
24 who were witnesses at some of the meetings or conference calls  
25 that Suzanne was telling us about.

K. Belknap - X

1 Q Okay. Let's look at Exhibit No. 84. Looking at  
2 Exhibit 84, tell us what this is.

3 A Again, this is a spreadsheet I put together outlining the  
4 responses from the managers.

5 Q Was one of the complaints that Ms. Ivie was making that  
6 Ms. DiNunzio had talked about an "old bus" or a "new bus" at  
7 the meeting?

8 A Yes. In a presentation that Stephani gave to her  
9 managers, that's correct.

10 Q And did you talk to the people who had attended that  
11 meeting?

12 A Yes. All of these people attended the meeting.

13 Q And what did they say about this "old bus/new bus" or  
14 "old pharma/new pharma" comment?

15 A Suzanne's allegation was that Suzanne was referring to  
16 age.

17 Q You mean Stephani?

18 A I'm sorry. That Stephani was referring to the age of  
19 employees. So we asked the managers what was their take-away  
20 from the meeting. Do they recall the "old bus/new bus"?

21 No one else took away from that meeting that Stephani  
22 was referring to age and that, in fact, Stephani clarified that  
23 she was not talking about age. That was -- they were talking  
24 about the mindset of people, so old pharma versus new pharma.  
25 In pharmaceuticals, "old pharma" could have been yesterday.



K. Belknap - X

1 Things change rapidly, depending upon the drugs or if we lose  
2 certain accounts, and so it is an ever-evolving situation. So  
3 what Stephani was stressing is you have to be able to change as  
4 the business changes. If you hang onto the approach you used  
5 yesterday or last month or last year, you may be behind, and  
6 you may not be able to progress forward.

7 Q Was one of the concerns that Ms. Ivie had raised was that  
8 she had been making comments about people's age, or is that  
9 related to this --

10 A I believe that was related to the "old bus/new bus."

11 Q So did you complete your investigation into these  
12 allegations that were being made?

13 A Yes.

14 Q And did you prepare a report of the investigation?

15 A Yes. That would be an EthicsPoint.

16 Q Looking at Exhibit No. 82 --

17 A Yes.

18 Q -- is that a copy of the summary that you prepared?

19 A Yes. So when the complaint came in, the first  
20 EthicsPoint -- the EthicsPoint case from December 5th and the  
21 one from the 18th contained both HR and compliance. So I had  
22 completed my investigation ahead of compliance. They were  
23 looking into some things. So I went to Mike in compliance and  
24 asked if it would be okay if I opened up a new EthicsPoint case  
25 to separate the HR pieces out, so I could go ahead and close

K. Belknap - X

1 it, and then they could continue on with the compliance  
2 investigation. He agreed that was okay. I believe he ran that  
3 past Madalina and agreed that that was okay to do. So that's  
4 why I opened this case in March, so I could include my findings  
5 in that and go ahead and close that out.

6 Q And so is this a summary of the results of your  
7 investigation?

8 A Yes.

9 Q So let's go through the allegations. There is allegation  
10 No. 1, that Stephani DiNunzio had authorized Mr. Griffith to  
11 take his family to Portland and Stephani was forcing her to pay  
12 for the trip. Did you complete that investigation?

13 A Yes. So Aaron was a PSS reporting to Suzanne. Any time a  
14 direct report has expenses, and they fill out an expense report  
15 in the system, it's going to go to the manager to ask them to  
16 approve it. Aaron was in an interim DSM system, but in the  
17 system it showed that he was still reporting to Suzanne. So  
18 therefore in the expense report system, if he did an expense  
19 report, it would still go to Suzanne for approval. So Stephani  
20 wanted Aaron -- was looking at Aaron -- potentially putting him  
21 in the DSM position, and I believe it was in Portland -- here  
22 in Portland. So Mike Hartman approved that he could come to  
23 Portland.

24 Q Mike Hartman approved that Mr. Griffith would go to  
25 Portland.

K. Belknap - X

1 A That Aaron could come to Portland; that he could bring his  
2 family to look around the area. House hunting -- I'm not sure  
3 they looked at houses -- but where potentially they could live,  
4 if they would like it here or not. But I did verify with  
5 Mike Hartman that he approved that travel. So it was not that  
6 Stephani was forcing Suzanne to approve unapproved travel.  
7 That was not the case. It was simply this was approved for him  
8 to make the trip. It was okay to go ahead and approve it when  
9 you get that expense report.

10 Q Let's go to the second issue that you investigated. This  
11 is related to a calibration meeting; that Suzanne was  
12 uncomfortable talking about team's performance in front of  
13 Aaron, who was interim DSM?

14 A Okay. So at the end of the year when it's time to do  
15 performance reviews for PSSs, all of the managers in the region  
16 get together and discuss the performance, and so they are  
17 consistent with how they're ranking their people, so a one to  
18 five ranking or rating, I should say.

19 Because Aaron was an interim, he still reported to  
20 Suzanne. Suzanne felt uncomfortable with him being there when  
21 she was talking about people that had been his co-worker. So I  
22 think -- I think maybe she had gone to Stephani ahead of time  
23 to say she was uncomfortable with that. Stephani agreed he  
24 should not be there. When it came time for Suzanne to start,  
25 my understanding was that Stephani just forgot. And after they

K. Belknap - X

1 talked about one person, then maybe Suzanne reminded Stephani,  
2 and then Stephani asked Aaron to leave.

3 Q Did you find anything wrong with respect to what had  
4 happened there?

5 A No.

6 Q The third issue relates to goal changes to Portland?

7 A Correct. And the goal changes were simply the requirement  
8 that the -- of prescriptions being written. So I think she  
9 moved five scripts out of Portland into Suzanne, which meant  
10 her sales reps would have to have the doctor prescribe five  
11 more prescriptions to meet that goal. I found that's not  
12 uncommon to adjust goals. I didn't find that was a severe  
13 change to that.

14 Q Did Ms. DiNunzio have the authority to make that change?

15 A Yes.

16 Q Let's look at the fourth allegation. Maybe we covered  
17 that already. That's "old bus/new bus." So let's skip on from  
18 that.

19 By the way, did Ms. DiNunzio tell you where she got  
20 this "old bus" comment from?

21 A Yes. It was a book -- I think the title was *Good to*  
22 *Great*. So I went online and looked that up. It was exactly as  
23 Stephani was describing it. It is not referring to age. It is  
24 referring to mindset and how we need to be ever-changing in the  
25 pharmaceutical industry.

K. Belknap - X

1 Q Did you reach a conclusion with respect to whether the  
2 comment reflected age discrimination?

3 A A conclusion it did not warrant -- or rise to age  
4 discrimination.

5 Q Okay. The fifth allegation that you looked into was that  
6 Stephani talked to Suzanne each week about needing to terminate  
7 employees. Did you look into that allegation?

8 A I asked Stephani about that. I don't believe there were  
9 any witnesses to that conversation. But Stephani denied ever  
10 putting pressure on managers to terminate someone. Stephani  
11 nor a manager has the authority to just terminate someone.  
12 They would have to work through employment practices on that  
13 matter.

14 I found that what Stephani was doing was talking  
15 about maybe the need to start coaching people better so that  
16 they performed better, because she did have at least two people  
17 that were underperforming. Also, this is talking about a  
18 performance improvement plan. They do not have the authority  
19 to place someone on that performance improvement plan without  
20 having that first reviewed by employment rights.

21 Q Let's go to the sixth allegation. It says that Ms. Ivie  
22 told Ms. DiNunzio that she had been uncomfortable with  
23 Ms. DiNunzio not being transparent with her during the year on  
24 some things.

25 A Let me refresh my memory on this one. Sorry. Correct.

K. Belknap - X

1 And my finding there was it had been discussed with her in the  
2 past.

3 Q We will finish -- we have two more. The seventh and  
4 eighth allegations. Sorry. We end at the sixth.

5 Do you know of other employees who were district  
6 sales managers, like Ms. Ivie, who were also terminated for  
7 failing to meet the coaching requirements?

8 A I remember two over the years, yes.

9 Q And were they put on performance improvement plans before  
10 their terminations?

11 A No. That's not a performance matter. That's a misconduct  
12 matter.

13 Q Can you explain that -- performance and misconduct?

14 A Okay. So at AstraZeneca -- and I'll say we would explain  
15 this normally to managers. So it is skill versus will. So if  
16 someone does not have the skill or the knowledge to do the job,  
17 we consider that a performance matter, and we would use a  
18 performance plan to try and help that person to come up to  
19 speed on things.

20 "Will" means, if they are willfully violating the  
21 company policy, intentionally misbehaving or engaging in some  
22 misconduct some way. We consider that a disciplinary matter.  
23 So we would use our disciplinary process, our warning process  
24 to manage through those matters.

25 Q Were there other complaints against Ms. DiNunzio that you

K. Belknap - X

1 were aware of?

2 A I'm sorry. There was a complaint in the summer of 2018  
3 against Stephani, yes.

4 Q Who made that complaint?

5 A Larry Hinson.

6 Q Did he make the complaint to you?

7 A Yes.

8 Q When did he make it with respect to when he was leaving  
9 the company?

10 A He called me and -- I believe he started out, "I want a  
11 severance package," and so I was a little bit taken offguard by  
12 that. I asked him what was going on. His complaint was around  
13 Stephani's leadership style and that -- I could tell he was  
14 angry, and he was like, "I just want to leave. I want a  
15 severance package."

16 Q Did you investigate the complaint?

17 A I did. I did.

18 Q Did you speak with Mr. Hinson?

19 A Yes.

20 Q Did you speak with anybody else?

21 A Yes. I know I spoke with Suzanne on that particular  
22 investigation, because one thing that Larry brought up was that  
23 Stephani forced Suzanne to take a conference call in the  
24 bathroom of her hotel. I'm kind of shocked as to why does  
25 Larry know about this; why is Larry telling me about this? So

K. Belknap - X

1 that's why I contacted Suzanne. But I also set up a call with  
2 Mike Hartman so that Mike Hartman could hear Larry's concern.

3 Q What did you find out about the bathroom?

4 A That Suzanne -- there was a call that Stephani, I believe,  
5 was the lead -- the leader on the call. I believe his title  
6 was President of North America. So Ruud Dobber was going to be  
7 on that call. Stephani was very concerned -- or very nervous  
8 about the call. I remember her saying that Suzanne may have  
9 been in an area where there was a lot of noise, and she was  
10 asking Suzanne to maybe move into another area where it would  
11 be quieter. I don't know who suggested the bathroom. I don't  
12 remember that part. But Suzanne went into the restroom, and  
13 Stephani went to her hotel room.

14 Q Did you conclude that there was any merit to Mr. Hinson's  
15 complaints about Ms. DiNunzio's leadership style?

16 A No. I had known -- I had previous conversations with  
17 Stephani about her concerns with Larry's performance; I believe  
18 it was six quarters where he had not met his sales goals. She  
19 had a conversation with him about, "If you don't improve, it  
20 may be that we are going to have to move to more a formal  
21 performance improvement plan." She had that conversation with  
22 him prior to him calling me.

23 Q Did Mr. Hinson's complaint include any allegations of age  
24 discrimination?

25 A I don't recall that.



K. Belknap - X

1 Q And did his allegations include anything about off-label  
2 marketing?

3 A I don't recall the off-label marketing. I don't recall  
4 the age discrimination here today.

5 Q So you mentioned earlier about AstraZeneca using a third  
6 party and how the coding goes through. Does AstraZeneca use a  
7 third party on unemployment claims?

8 A Yes.

9 Q In that, does it explain the reasons for the termination?

10 A Yes. In our system, when someone leaves the organization,  
11 there are various codes that we use that will explain why they  
12 have left, yes.

13 Q Did you receive training on discrimination and retaliation  
14 when you worked there?

15 A At AstraZeneca? Yes.

16 Q Tell me about that training.

17 A I know I attended some conferences that dealt with that  
18 area of employment law. We also had in-house legal counsel  
19 provide some training. I believe my director probably gave us  
20 some training on this as well. If it wasn't my director -- a  
21 lot of times she would assign to the other employment practices  
22 partners to give us an update or refresher training and that  
23 sort of thing, new events. So it might have been another EPP,  
24 so a co-worker of mine, that would have presented the training  
25 at the request of my director.

K. Belknap - X

1 Q Does everyone at AstraZeneca receive training on  
2 discrimination?

3 A Yes. Every year. I will back up a little bit and add  
4 this: The company requires every year that everyone go through  
5 some compliance training. Retaliation and discrimination is  
6 contained in that training. We also are required, at least  
7 once a year, to go through sexual harassment training.

8 Q You've testified about how you're investigating the  
9 complaints that Ms. Ivie is making, and you're also  
10 investigating the complaints that Ms. DiNunzio is making  
11 against Ms. Ivie. Do you see any problem in doing those  
12 together?

13 A I've always done that. We are responsible for all  
14 employee relations matters that come in from our client group.  
15 So when I started in HR, I was the only person in HR. There  
16 was no one else that could do that. That was probably -- I  
17 mean, it was a smaller organization, and so I was the only one.  
18 That was probably the first ten years of my career.

19 Q Do you think you can be a neutral investigator?

20 A Yes.

21 Q Do you report to Ms. DiNunzio in any way?

22 A No, not at all.

23 MS. RIECHERT: I have no further questions.

24 THE COURT: Thank you. Ladies and gentlemen, we will  
25 take our morning recess at this time. A reminder: Please do

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1 not discuss this case with each other or anybody else and be  
2 prepared to return about 11:53.

3 MS. RIECHERT: 10:53?

4 THE COURT: Oh, that's wrong. Thank you. A quarter  
5 till.

6 Please leave everything there and please remember you  
7 are still under oath.

8 (Recess.)

9 (Open court; jury present:)

10 THE COURT: Thank you very much. Please be seated.  
11 Mr. Oswald.

12 Redirect.

13 MR. OSWALD: Thank you, Your Honor.

14 REDIRECT EXAMINATION

15 BY MR. OSWALD:

16 Q Ms. Belknap, you mentioned before about the 80/20 policy,  
17 right?

18 A Yes.

19 Q And you talked about that with opposing counsel, right?

20 A Yes.

21 Q It is true, isn't it, it wasn't until April of 2019, after  
22 you had already disciplined Suzanne, that the business unit  
23 sent clear guidance to the field sales organization so that all  
24 DSMs were clear on the field visit expectation policy?

25 A I believe it was in effect before then. They may have

K. Belknap - ReD

1 sent out something clarifying some things, but it was in effect  
2 before that was my understanding. I believe I looked at  
3 documents to indicate that.

4 Q Okay. Let's look at Plaintiff's Exhibit No. 58, page 3.

5 Now, you know who Barbara McCullough is, right?

6 A She is in compliance, yes.

7 Q In fact, she is the vice president of U.S. Compliance,  
8 right?

9 A I'm not certain of her title. I'm sorry.

10 Q Ms. Belknap, we've looked at this before. This is when we  
11 had a picture of you up here in human resources?

12 A It is on the screen here, yes.

13 Q This is Barbara McCullough. She was vice president of  
14 North America Compliance, right?

15 A That's what it says. I just don't recall what her title  
16 was. I don't know if that changed after I left or what. But  
17 she was in compliance.

18 Q She was in compliance muckety-muck, right?

19 A Yes.

20 Q In fact, this is an email from her -- scroll down for me,  
21 please.

22 Okay. "Beginning with in April 2019, we sent clear  
23 guidance to the field sales organization so that DSMs are clear  
24 on the expectations, meaning we have level set the  
25 expectations"; isn't that right?

K. Belknap - ReD

1 A I see that. But that does not mean that they were not in  
2 effect prior to that.

3 Q I understand your position. Let's go to the timeline for  
4 a minute?

5 Okay. Now, I just want to confirm for a moment -- so  
6 just that we have a timeline clear here -- I want to confirm in  
7 early January 2019, you were investigating Suzanne's complaint  
8 of --

9 A Mine starts at February 18th. Here we go. Yes.

10 Q Thank you. In early January of 2019 you were  
11 investigating Suzanne's complaint of age discrimination and  
12 off-label marketing and Stephani's concerns about Suzanne's  
13 performance, right?

14 A That's correct.

15 Q And the complaint that you received first was Suzanne's  
16 complaint of off-label marketing, right?

17 A That's correct.

18 Q Now, I'm confirming the timeline again. Six weeks after  
19 Suzanne's -- your interview with Suzanne about age  
20 discrimination and her blowing the whistle on off-label  
21 marketing, you gave her the first written warning of her  
22 19-year career, right?

23 A Yes.

24 Q Now, Suzanne -- let's go to the first timeline here.  
25 Suzanne alleged that DiNunzio was retaliating against her

K. Belknap - ReD

1 beginning in August of 2018, right?

2 A I believe she brought up -- sorry -- she brought up  
3 allegations relating back earlier, yes.

4 Q And you mentioned, before you got the first ethics  
5 complaint relating to potential off-label marketing on  
6 December 7th, mentioning Suzanne, right?

7 A Yes. Can I just clarify? Maybe I misunderstood the  
8 previous question. I did not receive a complaint back in  
9 August.

10 Q And I understand that. The point is she was complaining  
11 of conduct that occurred back in August?

12 A Right. She had not come forward with that complaint  
13 before December.

14 Q I understand. Now, DiNunzio admitted to you that at least  
15 on one of her team calls someone expressed a concern about age,  
16 right?

17 A I believe it was at the meeting where she was talking  
18 about "old buses" and "new buses"; that someone asked, "Are you  
19 referring to age?" Then she clarified, no, she wasn't.

20 Q Okay. All right. Let's go back to the timeline for a  
21 minute. So you mentioned before that Suzanne Ivie's complaint  
22 came in first, and you interviewed Suzanne Ivie on  
23 January 15th, right?

24 A Yes. We interviewed her on January 15th.

25 Q Then you met with Stephani about Stephani DiNunzio's

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1 concerns been Suzanne?

2 A I had a call with Stephani, correct.

3 Q Now, Mike Pomponi sent you his notes of the January 15th,  
4 2019, interview that you and he had with Suzanne. He sent you  
5 those notes on the 23rd -- excuse me -- on the 23rd of January,  
6 right?

7 A I don't see that on my screen here.

8 Q Well, he sent you his notes. You testified that he did,  
9 right?

10 A I don't see it on here on what you are referring to, but  
11 he sent me notes, yes.

12 Q Okay. And these are the notes of the interview with  
13 Suzanne on the 15th of January, his compliance portion, right?

14 A I believe so, yes.

15 Q So you understood that Suzanne was alleging that DiNunzio  
16 was asking Suzanne to approve rep. statements that would be  
17 given to doctors so that they could be used to open  
18 interactions with those doctors, right?

19 A Referring to Selling With Insights. I understood that was  
20 her allegation, yes.

21 Q Okay. You understood that when Suzanne contacted  
22 Terry Grey in compliance, Suzanne told you that Stephani called  
23 her immediately thereafter and was furious that Suzanne went  
24 over DiNunzio's head, right?

25 A She may have told me that. I can't sit here today and

K. Belknap - ReD

1 recall that. But she may have said that.

2 Q That DiNunzio said that -- DiNunzio had decided that  
3 Suzanne could not be part of the RTS team, right; that she was  
4 going to strip her of some leadership position?

5 A We had talked about that in relation to the not working  
6 days and Suzanne responding that -- or that may have been at  
7 the end in her performance review.

8 Q But you understand that Suzanne alleged that DiNunzio had  
9 made that threat back in September?

10 A When they were talking about she was underperforming from  
11 a sales perspective; that she had sales reps underperforming;  
12 and that it was possible she was engaged in too many other  
13 projects or extracurricular activities. Yes, I remember that.  
14 The decision was -- and Suzanne admitted she was maybe engaged  
15 in too many things that were taking time away. So I did know  
16 that -- I think it was the women in leadership -- I don't know  
17 that acronym that you are referring to.

18 Q You understood that Suzanne was saying, "Look, I think I'm  
19 already being retaliated against," right?

20 A I believe I looked into that. I believe that was her  
21 complaint, and I looked into that.

22 Q Okay. Now, in fact, removing a leadership position from  
23 an employee, from an employee's job duties, because the  
24 employee complained that the manager was engaging in off-label  
25 marketing, that would be retaliation, right?



K. Belknap - ReD

1 A If it negatively impacted the employee. These were  
2 special projects. It was not an essential function of her job.  
3 It did not impact her salary in any way. It did not impact her  
4 standing, if you will, as an executive DSM. It was simply  
5 taking away a project so that she could focus on the essential  
6 functions of her job.

7 Q That wouldn't be retaliation?

8 A No.

9 Q Because that's not a benefit or a purpose of employment?

10 A No.

11 Q I understand. Issuing an employee a written warning,  
12 because the employee complained that the manager was engaging  
13 in off-label marketing would be retaliation?

14 A If that was the reason that we gave the written warning.  
15 That was not the reason we gave Suzanne a written warning. The  
16 reason was we found she was not working as the requirements  
17 stated.

18 Q If an employee is given a written warning because the  
19 employee complained that the manager was engaged in off-label  
20 marketing, that would be retaliation, wouldn't it?

21 A And I'll go by what I just stated. If that were the  
22 reason, yes. But that was not the reason Suzanne received a  
23 first written warning.

24 Q I understand that's your position. But if it were the  
25 case, that would be retaliation, wouldn't it?

K. Belknap - ReD

1 A If that were the case, that would be retaliation.

2 Q And that would be a violation of AstraZeneca's own code of  
3 ethics, right?

4 A Yes, it would be.

5 Q A violation of its anti-retaliation policy?

6 A Yes.

7 Q And if an employee is fired because that employee has  
8 complained that her manager was engaging in off-label  
9 marketing, that would be retaliation, right?

10 A Yes.

11 Q And that would be a violation of AstraZeneca's own code of  
12 conduct?

13 A Correct.

14 Q And if you allowed it to happen, you wouldn't be doing  
15 your job, right?

16 A That would be right.

17 Q Now, as an aside, during your investigation, you  
18 interviewed Mike Devries, right?

19 A Yes. I believe he was one of the PSSs, yes.

20 Q And Mike Devries told you that Suzanne has always been  
21 very ethical in her directions, right?

22 A I don't recall that exact statement. I don't recall  
23 everything he said. I'm not going to argue that he said that.  
24 I'm saying I can't remember today if that's what he said.

25 Q Do you want to see if I can refresh your recollection?

K. Belknap - ReD

1 A No. If it is in the notes, then that's what he said.

2 Q It is actually in your deposition.

3 A It has been two years.

4 Q I understand that. But he is telling you that she is an  
5 ethical manager, right?

6 A I'm not denying that, no. I'm not denying he told us  
7 that.

8 Q Now, you mentioned before about reviewing data. It was  
9 something you wrote on Plaintiff's Exhibit 91 in your report,  
10 right?

11 A Which data are you referring to?

12 Q That's what I'm getting to. The data you reviewed came  
13 from Ms. DiNunzio, right?

14 A Well, initially -- if we're talking about the field  
15 coaching form analysis.

16 Q Uh-huh.

17 A That initially came out of corporate learning and  
18 development.

19 Q You didn't actually go into Veeva, did you?

20 A She sent me these reports.

21 Q That she prepared. You did not go into Veeva, correct?

22 A I don't have access to Veeva. But I had the report. I  
23 believe she sent me the report.

24 Q When you say "she," you mean Stephani DiNunzio?

25 A Yes.

K. Belknap - ReD

1 Q I understand. Now, you mentioned that -- you said it was  
2 typical to have a manager at an OTR meeting -- an opportunity  
3 to respond -- even if there is a retaliatory complaint from the  
4 employee about that manager.

5 Did I get that right?

6 A Well, we were not discussing the concerns of  
7 retaliation -- the allegations of retaliation. That was a  
8 separate matter. So we were discussing Stephani's concerns  
9 with Suzanne, so that's correct.

10 Q You said it's typical to have a manager at an OTR meeting,  
11 an opportunity to respond?

12 A That's correct.

13 Q Even if there is a retaliatory complaint from the employee  
14 about that manager?

15 A That's correct. We were not discussing the retaliation at  
16 that meeting, so that is correct. We were having an OTR about  
17 Suzanne's work activity.

18 Q I understand. I'm going to ask it again.

19 A Okay.

20 Q You said it is typical --

21 A That's right. That a manager --

22 Q -- to have a manager at an OTR meeting, even if there is a  
23 retaliatory complaint from the employee about the manager?

24 MS. RIECHERT: Objection. Asked and answered.

25 THE COURT: Answer one more time.

K. Belknap - ReD

1 THE WITNESS: That's correct.

2 MR. OSWALD: Thank you.

3 BY MR. OSWALD:

4 Q Now, when you had your OTR meeting with Stephani -- and  
5 this is on the 18th of February, right, here on our timeline?

6 A An OTR with Stephani?

7 Q Yes. This is Suzanne's opportunity to respond, right,  
8 that you talked about to Stephani's allegations -- to  
9 DiNunzio's allegations?

10 A Okay. The OTR with Suzanne is what you are talking about?

11 Q I want to make sure I understand this correctly. You have  
12 a meeting, right -- you and Stephani DiNunzio have a meeting on  
13 February 18th, right?

14 A Yes.

15 Q Where you and she confront Suzanne with a whole myriad of  
16 questions that we have seen during your testimony?

17 A That's right.

18 Q This was Suzanne's OTR -- opportunity to respond?

19 A That's correct.

20 Q Now, you didn't tell Suzanne before this meeting what this  
21 meeting was going to be about, right?

22 A We typically don't disclose what the meeting is about.

23 Q You didn't notify Suzanne what this meeting was about  
24 before you had it -- you and Stephani DiNunzio had it with her?

25 A I did not disclose it, no. Stephani sent the meeting

K. Belknap - ReD

1 request to Suzanne. I did not have any contact with Suzanne  
2 prior to that.

3 Q Would it surprise you to learn that Suzanne thought it was  
4 actually about her whistleblowing complaint?

5 A Well, I believe the subject was coaching discussions, so  
6 I'm not sure why she would think it was about the  
7 whistleblowing complaints.

8 Q You mentioned Chris Thomsen, right?

9 A Yes.

10 Q The context was that Chris Thomsen -- there is no problem  
11 in having Chris Thomsen train Suzanne Ivie, because he wasn't  
12 her subordinate. He was actually a DSM, right, her peer? He  
13 had been her subordinate, but now was the DSM, right? That was  
14 the point you were trying to make?

15 A The point I was trying to make is they were peers, yes.

16 Q Okay. They were peers then, and you mentioned the fact  
17 that he remains a DSM today?

18 A As far as I know.

19 Q In fact, he replaced Suzanne, right?

20 A You told me that yesterday; that he replaced Suzanne. I  
21 was not aware of that. You told me that yesterday.

22 Q Did you ever ask Ms. DiNunzio whether she intended to have  
23 him replace Suzanne?

24 A No. I left before Suzanne had left the organization.

25 Q Okay. Now, I just want to be clear Suzanne Ivie asked you

K. Belknap - ReD

1 directly to investigate whether DiNunzio had intended to  
2 replace her with Chris Thomsen, right?

3 A That was one of Suzanne's concerns.

4 Q And you never asked DiNunzio whether --

5 A I may have asked her that -- was there any truth to  
6 that.

7 Q And she said?

8 A She would have said no.

9 Q Which turns out not to be true?

10 A There was no opening -- we weren't even discussing  
11 terminating Suzanne when I was there.

12 Q We're going to get to that in just a minute.

13 A Okay.

14 Q Now, you mentioned the fact that you believe that Suzanne  
15 went on leave because she learned of performance issues; is  
16 that right?

17 A I believe what I testified to was that that is a pattern  
18 that we find with employees when they think they are about to  
19 be placed on a performance plan, or I will just say "be in  
20 trouble in some way." That is a pattern that we see in  
21 employment practices when oftentimes people go on leave.

22 Q You didn't actually look at any medical records, though,  
23 right?

24 A I don't have access to medical records.

25 Q All right. Now, you were asked about the statement in

K. Belknap - ReD

1 which you said -- you confirmed that -- you initially said that  
2 you were there to protect the company?

3 A That's correct.

4 Q AstraZeneca?

5 A That's in my job description, that's right.

6 Q And then you backed up and said, well, you were there also  
7 to be a neutral party, right?

8 A I backed up and said? I'm sorry? I mentioned that --

9 Q You clarified, "I'm there to be a neutral party," right?

10 A Yes. I believe I said that to Suzanne. I'm there to be  
11 fair; to make sure that all employees are treated fairly.

12 Q Okay. And that's manager or employee alike, right?

13 A Employee includes everyone, no matter what their position.

14 Q And you protect not only managers but someone like a  
15 19-year employee, right?

16 A That's correct.

17 Q Okay. Well, let's look at that. Let's look at  
18 Plaintiff's Exhibit No. 88. Do you recognize this email?

19 A I do.

20 Q It is from you to Stephani DiNunzio on April 26th, right?

21 A Yes.

22 Q "Hello, all. I received word in compliance" -- actually  
23 would you read that?

24 A "I received word from compliance today that it is okay for  
25 me to officially inform Stephani is that we are closing the HR



K. Belknap - ReD

1 and compliance investigations with a finding of  
2 unsubstantiated. Happy Friday, Stephani. I am be informing  
3 Suzanne next week."

4 Q Did you send this email to Stephani DiNunzio?

5 A I sent it to Stephani, Mike Hartman, and Amy Welch, yes.

6 Q To Stephani and her boss, Mike Hartman, right?

7 A Yes.

8 Q Okay. And you had some text messages with Stephani  
9 DiNunzio too before the May 3rd meeting with Suzanne, right?

10 A Are those the ones we looked at earlier?

11 Q We are going to look at them right now. Let's look at  
12 Plaintiff's Exhibit No. 99. It says, "Hi, Karen. Would you  
13 mind if I schedule a little time with you before you leave? I  
14 would love to get some guidance on how to effectively navigate  
15 the next phase with Suzanne."

16 Then you respond, right?

17 A I respond, "Happy to talk."

18 Q Then what does Stephani DiNunzio say in return?

19 A She says, "Hey, there. I can't believe it is your last  
20 day. To put a bow on everything, were you able to share with  
21 Suzanne that the claims were unsubstantiated?"

22 I relied, "We will be talking this afternoon."

23 She said, "Thanks, Karen. I haven't heard anything  
24 further on her concerns about retaliation and discrimination.  
25 I'm assuming that's this afternoon as well."

K. Belknap - ReD

1 Q Are those text messages that you and Stephani DiNunzio  
2 exchanged on May 3rd, the very day that you met with Suzanne?

3 A It says May 3rd, and since she references it is my last  
4 day, I assume it was May 3rd.

5 Q Take a look after "thank you."

6 A Yes. It does say May 3rd. Yes, I see that now.

7 Q Okay. And then you continue, right?

8 A After "thank you," do I continue?

9 Q Yes. We are going to look at Plaintiff's Exhibit No. 100.  
10 So let's start at the top. "Happy to talk." Continue.

11 A "Happy to talk."

12 She says, "Thank you."

13 Again, "Hey there. I can't believe it is your last  
14 day. To put a bow on everything, were you able to share with  
15 Suzanne that the claims were unsubstantiated?"

16 And I said, "We will be talking with her this  
17 afternoon."

18 She said, "Thanks, Karen. I haven't heard anything  
19 further on her concerns about retaliation and discrimination.  
20 I am assuming that's this afternoon as well.

21 "I just covered all of it with her. No findings.

22 "Thank you."

23 Q So on May 3rd you did put a bow on it for Ms. DiNunzio,  
24 right?

25 A Yes.

K. Belknap - ReX

1 Q Thank you.

2 A "Thank you," I'm done? No further questions?

3 MR. OSWALD: No further questions.

4 THE COURT: Hold on one second.

5 MS. RIECHERT: One more question.

6 RECROSS-EXAMINATION

7 BY MS. RIECHERT:

8 Q Is "happy Friday" another AstraZeneca phrase?

9 A It is. I mean, it's common for me to say "happy Friday."  
10 Sometimes I start off that way. Generally I'll tell people,  
11 "Have a great weekend." It's hard work at AstraZeneca,  
12 especially for people in sales, I realize that; in the field.  
13 So I'm just telling her "happy Friday."

14 Also, I don't know if anybody has ever been through  
15 an investigation before. It can be stressful, and I think when  
16 you are told "no findings," that would be a happy day for me.

17 Q Thank you.

18 A A little human touch on that. Sorry.

19 THE COURT: Thank you. May this witness be excused?

20 MR. OSWALD: Yes, Your Honor.

21 THE COURT: Thank you very much. I appreciate it.

22 Call your next witness, please, sir.

23 MR. OSWALD: Stephani DiNunzio.

24 THE COURT: Please step forward, ma'am.

25 THE WITNESS: Thank you.

S. DiNunzio - D

1 THE COURT: Come up to the box.

2 (The witness was duly sworn.)

3 THE CLERK: Be seated, please. You can remove your  
4 mask if you'd like.

5 State your full name and spell your last name for the  
6 record.

7 THE WITNESS: Sure. My name is Stephani DiNunzio.  
8 D-I-N-U-N-Z-I-O.

9 THE COURT: Thank you.

10 MR. OSWALD: Permission to approach, Your Honor.

11 THE COURT: Please.

12 DIRECT EXAMINATION

13 BY MR. OSWALD:

14 Q Ms. DiNunzio, I'm Scott Oswald. I represent Suzanne Ivie.

15 A Hi, Scott. Nice to see you.

16 Q Hello. Thanks for being here today.

17 A Sure.

18 Q Okay. So just a little bit about your background, if we  
19 could. You are a commercial business director at AstraZeneca,  
20 right?

21 A That is correct.

22 Q On our chart here, you are here as a commercial business  
23 director reporting initially to Mike Hartman, right?

24 A That's right.

25 Q Mike Hartman actually hired you, right?

S. DiNunzio - D

1 A That's correct.

2 Q And then in March of 2019 reporting to Matt Gray?

3 A That is right.

4 Q Now, before AstraZeneca promoted you to the commercial  
5 business director position, you were in various positions until  
6 you were promoted into a commercial business director position,  
7 right, in September of 2017?

8 A That's correct. I had a variety of developmental roles to  
9 prepare me to be a CBD.

10 Q And your responsibilities as a commercial business  
11 director is to deliver AstraZeneca's business for its  
12 respiratory and health therapeutic area, right?

13 A That's correct.

14 Q As a commercial business director, the CBD, you supervise  
15 seven district sales managers; is that right?

16 A That's correct.

17 Q And Mike Hartman hired you. He was your first supervisor,  
18 right? He was your executive business director, right?

19 A That is right.

20 Q Now, Matt Gray became your executive business director in  
21 March of 2019, and he remains your supervisor today?

22 A That is incorrect.

23 Q He remained your supervisor until summer of 2020?

24 A That's also incorrect. I was promoted in December of last  
25 year. I now report to Bob DeLap.

S. DiNunzio - D

1 Q All right. He was your supervisor -- Matt Gray was --  
2 from March of 2019 through June of 2019?

3 A That's right.

4 Q All right. Now, when you became a commercial business  
5 director, you supervised Scott Christensen, right?

6 A Correct.

7 Q Blair Hanneman?

8 A That's right.

9 Q Genie Hamilton?

10 A That's right.

11 Q Chris Thomsen?

12 A That is right.

13 Q William Bauerle?

14 A Yes.

15 Q Larry Hinson?

16 A Yes.

17 Q Andrew Maratas?

18 A Correct.

19 Q And Suzanne Ivie, right?

20 A Yes. That's right.

21 Q And Larry Hinson is here on our chart, right? He reported  
22 to you and to Suzanne Ivie, right?

23 A Yes. I supervised them both.

24 Q And Linda Truax, she was a senior executive pharmaceutical  
25 sales specialist. She ultimately reported to you, right?

S. DiNunzio - D

1 A She did not report directly to me, no.

2 Q She ultimately reported to you?

3 A Well, she ultimately reported to Ruud, but she reported  
4 directly to Larry.

5 Q Who reported to you?

6 A Correct. That's right.

7 Q From October of 2017 through June of 2017, you supervised  
8 Suzanne, right?

9 A That is correct.

10 Q Excuse me. I'm going to say that again. From  
11 October 2017 through June of 2019 you supervised Suzanne?

12 A Yes, that's right.

13 Q All right. So that we understand, the sales professionals  
14 report -- the PSSs -- they report to district sales managers,  
15 right, DSMs?

16 A That's right.

17 Q Who report to the commercial business director, the CBD?

18 A That's correct.

19 Q Which would have been you in 2019?

20 A Uh-huh.

21 Q Who report to the executive business directors, the EBDs?

22 A That is right.

23 Q Who report to the executive vice president of respiratory  
24 Mina Makar, right?

25 A That's right.

S. DiNunzio - D

1 Q Who then ultimately reports to Ruud Dobber, president of  
2 the bio-pharmaceutical unit?

3 A That's right.

4 Q Let's talk about training for a minute.

5 A Sure.

6 Q AstraZeneca trains you on its policies and procedures  
7 regularly, right?

8 A Yes, that is correct.

9 Q You received training on the False Claims Act and its  
10 requirements, right?

11 A Consistently, yes.

12 Q AstraZeneca trained you on off-label marketing every year?

13 A Yes. That is right.

14 Q AstraZeneca trained you on off-label marketing and the  
15 False Claims Act?

16 A That is correct.

17 Q You believe that the False Claims Act and off-label  
18 marketing training is important?

19 A I do. I believe it's very important.

20 Q Important to ensure that you are promoting within  
21 AstraZeneca's labels?

22 A Yes, sir.

23 Q And not misrepresenting AstraZeneca's products, right?

24 A That is correct.

25 Q Now, you believe that False Claims Act and off-label



S. DiNunzio - D

1 marketing training is also important for patient safety?

2 A Yes. Of course.

3 Q You receive training on the respiratory products that your  
4 sales representative are marketing, right?

5 A As a commercial business director?

6 Q Yes.

7 A We are not required to go through training, but I opted to  
8 get the training material and look through it myself.

9 Q You received training on respiratory products that your  
10 sales representative were marketing, correct?

11 A I did. That was my choice -- asking the training  
12 department to forward those materials to me so I could complete  
13 it independently. It wasn't required.

14 Q Why not?

15 A I can't speak to that. I'm so sorry. It is not my  
16 decision.

17 Q Well, okay. So let's be in the moment. You've got -- you  
18 want to look at these training materials. It is not required,  
19 but you kind of looked into it. Why?

20 A Because I thought it was important. I would be  
21 interacting with customers. They would be asking me questions.  
22 I wanted to make sure I was informed, as you've just mentioned,  
23 properly representing our products.

24 Q It's critical?

25 A It's very important.

S. DiNunzio - D

1 Q Now, that training consisted of reviewing the written  
2 materials that the sales reps had, right?

3 A It was a training module that the sales professional would  
4 go through in new-hire training.

5 Q Okay. Let's talk about anti-discrimination and  
6 anti-retaliation policy training at AstraZeneca.

7 A Sure.

8 Q AstraZeneca trained you on its anti-discrimination and  
9 anti-retaliation policies, right?

10 A Yes, consistently.

11 Q At least once a year?

12 A That's correct.

13 Q There are a variety of avenues employees can take to  
14 complain about discrimination or off-label marketing, right?

15 A That's right. There are many channels that an employee  
16 can take.

17 Q Those avenues include the HR hotline?

18 A That's right.

19 Q Or compliance hotline?

20 A Correct.

21 Q The employee can choose whichever they feel most  
22 comfortable with, right?

23 A Yes. That's an important part of it, yes.

24 Q AstraZeneca has a policy of investigating every complaint  
25 of discrimination, retaliation, or off-label marketing, right?

S. DiNunzio - D

1 A That's correct. And I agree with that.

2 Q Why is that important?

3 A It is very important for every employee to know if they  
4 have any concerns, that it will be appropriately addressed and  
5 investigated.

6 Q And that they are not retaliated against, correct?

7 A Of course.

8 Q That would be improper?

9 A Yes, it would.

10 Q It would be a violation of AstraZeneca's code of conduct?

11 A Naturally.

12 Q And it would be illegal?

13 A Of course.

14 Q AstraZeneca, in fact, has a zero tolerance policy for  
15 retaliation, right?

16 A They do. I'm glad they do.

17 Q Why?

18 A Because employees should be feel free and comfortable to  
19 come forward with any concerns that they have via any channel  
20 that they are comfortable with.

21 Q So they should feel as if -- when working, let's say for a  
22 manager, someone like you, that they are safe, right?

23 A Of course.

24 Q And you try to foster a safe cell for all of your  
25 employees?

S. DiNunzio - D

1 A Of course I do.

2 Q They should never feel as if they can't speak up, right?

3 A No. Having a speak-up culture is really very, very  
4 important to AstraZeneca.

5 Q And you try to foster a culture within all of your direct  
6 reports where they felt comfortable in speaking up, right?

7 A Yes. Many of them have spoken up and continue to speak up  
8 to me consistently.

9 Q Speaking up to you?

10 A Well, yeah. Of course you can go through any channel that  
11 you want. One viable channel is to go to your manager.

12 Q Got it. And it's perfectly appropriate -- indeed you  
13 encourage employees, if they are not comfortable coming to you,  
14 they should go to the HR hotline or compliance hotline, right?

15 A They should use any channel that they feel comfortable  
16 with.

17 Q The comfort of the employee is critical, right?

18 A Of course.

19 Q Now, you know that a manager at AstraZeneca can be  
20 disciplined for discriminating or retaliating against another  
21 AstraZeneca employee, right?

22 A Rightfully so.

23 Q And those penalties are particularly severe if it is the  
24 manager that is discriminating or retaliating against his or  
25 her subordinate, right?

S. DiNunzio - D

1 A That's correct.

2 Q And that can include up to and including removal from  
3 AstraZeneca, right?

4 A That is right.

5 Q Let's talk about AstraZeneca's disciplinary policy for a  
6 minute.

7 A Okay.

8 Q You understand that AstraZeneca has a disciplinary policy,  
9 right?

10 A I do.

11 Q It can be as simple as a verbal warning, right?

12 A That is right.

13 Q To a written -- to a first written warning?

14 A Yes. There is a range.

15 Q To a final written warning, right?

16 A That is true.

17 Q To a performance improvement plan?

18 A Yes.

19 Q Up to and including termination?

20 A That is correct. That covers the range.

21 Q You are familiar with this process?

22 A I am.

23 Q Now, in the fall of 2018, you placed one of your direct  
24 reports, Andrew Maratas, one of Suzanne Ivie's peers, a DSM, on  
25 the same level as Suzanne, on a performance improvement plan?

S. DiNunzio - D

1 A That is right.

2 Q For his lack of leadership in coaching, right?

3 A There were a variety of reasons that Andrew was placed on  
4 a PIP.

5 Q The performance improvement plan was for a lack of  
6 leadership and coaching, right?

7 A Yeah. As I recall from the document, there were really  
8 two underlying positives of his performance improvement plan.  
9 The first one, he was really struggling to hold his sales  
10 professionals accountable. The second was he was really having  
11 a hard time creating a positive work environment, that type of  
12 environment you just spoke of where people feel safe and feel  
13 comfortable.

14 Q And so you were going to hold him to that to make sure  
15 that he made sure that his subordinates felt safe and  
16 comfortable, right?

17 A My job is to hold the DSMs to the AstraZeneca standard.  
18 Andrew wasn't meeting our standard, and so that was the  
19 disciplinary action.

20 Q And you hold yourself to that same standard, right?

21 A I do.

22 Q And that's your obligation as a manager?

23 A Of course it is.

24 Q Now, Andrew Maratas was a DSM, just like Suzanne Ivie,  
25 right?

S. DiNunzio - D

1 A That is right.

2 Q Mr. Maratas successfully completed the performance  
3 improvement plan, right?

4 A That's correct. The intent of a PIP is to give people an  
5 opportunity to modify their behavior, and Andrew successfully  
6 modified his behavior.

7 Q Andrew Maratas is still employed with AstraZeneca today?

8 A No, he is not.

9 Q When did he leave?

10 A Andrew was displaced in December of 2020.

11 Q "Displaced"?

12 A "Laid off" would be another word.

13 Q I see. So he remained employed through June of 2019  
14 through December of 2020, right?

15 A That is right.

16 Q And when you say "displaced/laid off," this was, what, a  
17 business decision?

18 A I wasn't involved in that business decision. That  
19 decision was made at the USLT -- at the United States  
20 Leadership Team, and so I was not part of that decision-making  
21 process.

22 Q Okay. Let's turn through the summer of 2017.

23 Ms. DiNunzio, we created this timeline to help all of us,  
24 including our jurors, to get a sense of timing of things, and  
25 you are seeing that in front of you there. So what I want to

S. DiNunzio - D

1 do is talk a little bit about before. We are now in 2017, and  
2 so before the first item on our timeline here, okay?

3 A Okay.

4 Q Now, generic AirDuo was introduced in the summer of 2017,  
5 right?

6 A That's right.

7 Q And in 2018 the Seattle region had the highest generic  
8 AirDuo uptake in AstraZeneca's respiratory business unit,  
9 right?

10 A I don't know if it was the highest, but it was among the  
11 highest. I would feel comfortable saying that.

12 Q This impacted the sales and the volume of the business  
13 unit's primary product, SYMBICORT, right?

14 A In some cases it did; not all cases. It wasn't a true  
15 generic.

16 Q In the Salt Lake City region, Suzanne Ivie's region, two  
17 factors contributed to the AirDuo uptake?

18 A It will be easier for me to answer that if you tell me the  
19 two factors.

20 Q I'm just asking weren't there two factors?

21 A So this was about four years ago. So this was quite some  
22 time ago. For me, in my mind, there was really one primary  
23 factor, and that was that the biggest insurance payer pretty  
24 quickly put generic AirDuo on their formulary, the list of  
25 medications that a physician can prescribe.



S. DiNunzio - D

1 Q Well, the first was the addition of generic AirDuo within  
2 one month of the approval to the select health formulary,  
3 right?

4 A That's right.

5 Q And that happened in the summer of 2017, right?

6 A Yes. That time is correct.

7 Q And SelectHealth required that healthcare providers use  
8 generic drugs 90 percent of the time, right?

9 A You know, I can't speak to SelectHealth's policy. What I  
10 can tell you is that SYMBICORT's status was not changed. We  
11 remained a branded preferred product; in fact, the only branded  
12 preferred product in the class.

13 Q Let's look at Plaintiff's Exhibit No. 21. Do you  
14 recognize this document?

15 A I do. It is my year-end assessment for 2018.

16 Q These are your words, right?

17 A Yes, of course.

18 Q Let's scroll down.

19 All right. "Now, SelectHealth is owned by HC, which  
20 is generic's first health system that requires 90 percent  
21 generic utilization at affiliated HCPs."

22 Did I read it that correctly?

23 A Yeah. You are reading it correctly. They were very much  
24 free to write their preferred branded products as well.

25 Q Thank you.

S. DiNunzio - D

1           Now, the second reason was the removal of SYMBICORT  
2 from inpatient use at 23 hospitals, right?

3     A     Yes. That had some spillover effect. The spillover  
4 effect is very difficult to measure. As it relates to the 90  
5 percent generic, if that were fully the case, then generic  
6 AirDuo would have had a 90 percent market share immediately,  
7 and that's just not the case. As I mentioned, those healthcare  
8 prescribers were still very much free to write branded  
9 SYMBICORT.

10    Q     Let's look at your own words again in 2018.

11    A     Of course.

12    Q     Plaintiff's Exhibit No. 21. "The second was the removal  
13 of SYMBICORT from the IHC inpatient formulary that impacted 23  
14 hospitals."

15           Did I read that correctly?

16    A     Yes.

17    Q     Thank you.

18    A     You're welcome.

19    Q     Thank you. Okay. And just so I'm clear, just above that,  
20 it says, "In Salt Lake City, two factors contributed to this  
21 uptake," right?

22           Did I read that correctly?

23    A     Yes, you did read that correctly.

24    Q     And Salt Lake City was Suzanne Ivie's region, correct?

25    A     Yes. What I was capturing there in my year-end comments

S. DiNunzio - D

1 were some mitigating factors. Certainly there were a couple of  
2 things that were outside of Suzanne's control. That's very  
3 clearly stated there. That's for one product. We did promote  
4 four products that year, and her performance was suboptimal on  
5 all four.

6 Q Is that a yes?

7 A Could you repeat the question?

8 Q Certainly.

9 Salt Lake City was Suzanne's Ivie's region, correct?

10 A Salt Lake City was her district, yes.

11 Q Thank you. So opposing counsel tells me we're on a very  
12 short time frame today, so I'm going to ask you to answer my  
13 questions as I give them to you. Is that okay?

14 A I'll do my very best.

15 Q I'd appreciate that.

16 Now, this decision, by the way, was based on a system  
17 error -- the removal of SYMBICORT from the inpatient use at 23  
18 hospitals. The decision was based on a system error, right?

19 A For inpatient -- the inpatient situation, yes. There was  
20 an error made with the group purchasing organization.

21 Q And that system error resulted in the incorrect contract  
22 price being given to the system for over a year, right?

23 A That is right.

24 Q That wasn't your fault?

25 A It was not.

S. DiNunzio - D

1 Q And it wasn't anybody at AstraZeneca's fault, right?

2 A That is correct.

3 Q Okay. I want to turn to August 2018. Let's look at our  
4 timeline again. So now we are going to fast forward to August  
5 of 2018, okay?

6 A Okay.

7 Q Now, in August of 2018, you had phone calls with Suzanne  
8 about SYMBICORT and AstraZeneca's selling approach, right?

9 A I had phone calls with Suzanne and every member of my  
10 team. We were preparing for a fall campaign.

11 Q In August of 2018, you had phone calls with Suzanne about  
12 SYMBICORT and AstraZeneca's selling approach?

13 A That's right.

14 Q SYMBICORT is a treatment for patients who suffer from  
15 asthma and COPD, right?

16 A That's right.

17 Q What you talked to Suzanne about in August of 2018 was a  
18 concept known at AstraZeneca as engaging with insights, right?

19 A That's correct.

20 Q Engaging with insights is one of the steps within  
21 AstraZeneca's selling framework, right?

22 A You're correct.

23 Q It is the initial verbalization that you have with a  
24 customer?

25 A That's a very clear way to characterize it.

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1 Q The point of selling with insight is to begin a dialogue  
2 that would transition to a product discussion?

3 A Yes. The point of engaging with insights is to start your  
4 call with a statement that's about the problem or the patient  
5 but not the product.

6 Q The point of selling with insights is to begin a dialogue  
7 that would transition to a product discussion?

8 A That's another way of saying it.

9 Q This could lead to the doctor writing more prescriptions?

10 A I disagree with that. It could lead to a more robust  
11 discussion.

12 Q So it would lead -- potentially you have this with the  
13 doctor so that they will write fewer prescriptions?

14 A The reason we would engage with insights is because when  
15 we don't that, our calls are somewhat transactional and really  
16 short. But when we started our calls with a statement about  
17 either the patient or a problem, what we found is that there  
18 was much more of a two-way dialogue with our customers.

19 Q The reason that you had this interaction was because you  
20 wanted the doctor to write fewer prescriptions?

21 A No. But what we wanted to do is really engage in robust  
22 discussions with our customers.

23 Q And the purpose of that is so that the doctor will write  
24 more prescriptions?

25 A The role of a sales professional is, of course, to achieve

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1 their sales target, and the way you do that is by having a  
2 robust discussion about the product and the appropriate  
3 patient.

4 Q So that the doctor will write more prescriptions?

5 A That ultimately is the goal -- to achieve our sales  
6 targets.

7 Q Now, there are two types of engaging with insights, right?

8 A That's correct.

9 Q One is brand-led?

10 A That's right.

11 Q "Brand-led" being -- AstraZeneca is a branding department,  
12 right?

13 A Another word for "brand" is "marketing." Yes,  
14 marketing-led.

15 Q And the other sales professional created?

16 A Yeah. We would characterize that as a local insight.

17 Q Sales professional created?

18 A That is correct.

19 Q Now, the brand-led type is approved by the branding  
20 department at AstraZeneca, right?

21 A That is right.

22 Q Now, I want to take you to 2018 for a moment. At that  
23 time AstraZeneca's corporate brand department had only created  
24 four or five insights for your use?

25 A That sounds right. Insights oftentimes were on our

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1 printed materials. They didn't refresh those very often.

2 Q This is a relatively small number?

3 A You are correct.

4 Q You were concerned that having only four or five insights  
5 for SYMBICORT -- to use for SYMBICORT reduced their impact,  
6 right?

7 A I think that's a mischaracterization. It was in March of  
8 2018 that myself, along with my leadership team, decided that  
9 there was an opportunity for the whole region as a whole to get  
10 better at this skill. It wasn't only because there were four  
11 or five, but we thought we could do better at really engaging  
12 in dialogues with our customers, and so we collectively decided  
13 to invest in the skill.

14 Q Please open your deposition. That's the document I have  
15 on the left side of the bench there, please.

16 Please turn to page 119, line 21. Let me know when  
17 you are there.

18 A I'm there.

19 Q "QUESTION: Okay. And so tell me about the sales  
20 created professional insight.

21 "ANSWER: Well, sure. So a brand-created insight,  
22 they would only provide us with, say, four or five insights.  
23 It's a relatively small number. And so you could only open a  
24 dialogue with a customer, with a healthcare provider, with that  
25 same data a certain number of times before it reduces its

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1 impact."

2 A That's true. So there are two things there. The first  
3 one is it was a limited number. There is only so many times  
4 you could say the same thing to the same customers for it to  
5 resonate, and we believed that we needed to get better at that  
6 skill in general.

7 Q So let's talk about the sales professional generated  
8 insights.

9 A Sure.

10 Q The sales professional generated insights are the insights  
11 that the sales professionals get from their observations of the  
12 world?

13 A That's partially true. That's not fully true.

14 Q Let's look at 119, page 21.

15 You read down to "a certain number times before it  
16 would reduce its impact."

17 Do you see that 120 on the next page, line 4?

18 A Yes, I do.

19 Q Okay. I'll just start reading there.

20 "And so a sales professional generated insight would  
21 be an insight that they get from their observations of the  
22 world?"

23 A And then that sentence says, "You can get them from a  
24 variety of different places." And so it is not just  
25 observations. It can be from reading. It can be from talking



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1 to other clinicians. It can be all kinds of ways that they can  
2 come up with their insights.

3 Q And the remainder of it says, the important thing is that  
4 they are true, right?

5 A Correct.

6 Q They are compliant?

7 A That's right.

8 Q And they align with brand strategy?

9 A Those were the three rules that we had to make sure we  
10 complied with.

11 Q "Complied" includes the fact that they cannot be  
12 off-label, right?

13 A Yes, of course.

14 Q Ms. DiNunzio, you agree with Rule No. 1, "AstraZeneca must  
15 market its products only for their approved uses," correct?

16 A Yes, I do.

17 Q You also agree that AstraZeneca must not put its profits  
18 over its patients, right?

19 A That is correct.

20 Q Okay. So let's go back to our timeline again.

21 A Sure.

22 Q We were talking about the sales professional generated  
23 insights?

24 A That's right.

25 Q Now, you wanted to increase the number of sales

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1 professional generated insights, right?

2 A I don't know if I wanted to increase the number. I wanted  
3 to improve the skill as it relates to sales professional  
4 generated insights.

5 Q You wanted sales professionals to get in the habit of  
6 creating insights themselves?

7 A Because we knew it was a highly effective skill to have.

8 Q Is that a yes?

9 A Could you repeat the question?

10 Q You wanted sales professionals to get in the habit of  
11 creating insights themselves?

12 A Yes, because it was part of our selling model.

13 Q I wanted the sales professionals to look around the  
14 environment for insights that they would then share with their  
15 healthcare providers?

16 A That's correct. There is a -- visually, yes, observing is  
17 one way to generate an insight. There are other ways as well.

18 Q You wanted your sales professionals to look around their  
19 environment for insights they would then share with their  
20 healthcare providers?

21 A As long as they were compliant, true, and in alliance with  
22 the brand strategy, yes.

23 Q Now, by August of 2018 -- let's look at our timeline  
24 again. You and Suzanne had gone back and forth on this, right?

25 A Yeah. We worked together as a leadership team to create a

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1 campaign for September called "A September to Remember," that  
2 is correct.

3 Q The reason you and Suzanne went back and forth on this was  
4 because Suzanne was your business unit's compliance champion,  
5 right?

6 A She was the region's compliance champion, yes.

7 Q And as the business unit's -- the region's compliance  
8 champion, Suzanne participated in monthly calls with  
9 AstraZeneca's compliance department, right?

10 A She did.

11 Q If sales professionals had compliance concerns, Suzanne  
12 was someone they could go to with those compliance concerns,  
13 right?

14 A That is right.

15 Q Now, on August 24th -- this is 2018. So we are back on  
16 our timeline here, right, just before it begins.

17 At your request, Kateri Broussard circulated a set of  
18 sales professional generated insights relating to the selling  
19 of SYMBICORT, right?

20 A She emailed a set of sales professional generated  
21 insights. I don't recall if it was at my request. It very  
22 well could have been, I just don't recall that part.

23 Q You forwarded Kateri Broussard's selling with insights to  
24 Suzanne because Suzanne was your group's compliance champion,  
25 right?

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1 A Because I valued her opinion. I was a little bit hesitant  
2 to email insights. As I mentioned, we kicked off in March this  
3 initiative to help us get better at it. This is the first time  
4 there was an email about it, because I was very uncomfortable  
5 with it. I wanted the sales professionals to truly generate  
6 them on their own.

7 Q You forwarded Kateri Broussard's selling with insights  
8 email to Suzanne because she your group's compliance champion,  
9 right?

10 A And I wanted her opinion, yes.

11 Q You and she had multiple conversations about sales  
12 professional generated insights and the need to keep them  
13 compliant with AstraZeneca's code of ethics, right?

14 A Yes. I valued Suzanne, as our compliance champion. We  
15 had many concerns. It was a new skill. We wanted to make sure  
16 we were doing it appropriately. A concern that Suzanne and I  
17 shared was that, because it was a new, sales professionals were  
18 just making them really complex and very long. That wasn't  
19 necessary. So Suzanne and I had several conversations about  
20 that.

21 Q You sent them -- at that point you and she had multiple  
22 conversations about sales professional generated insights and  
23 the need to keep them compliant with AstraZeneca's code of  
24 ethics, right?

25 A That is right.

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1 Q And compliant with the law, right?

2 A Of course.

3 Q Now, you had been hesitant to send any of these sales  
4 professional generated insights over email, right?

5 A Yes. For two very good reasons.

6 Q You asked Suzanne, in her role as compliance champion,  
7 whether the sales professional generated insights were  
8 compliant?

9 A Yes. Suzanne shared my concern about emailing insights.  
10 It made it much more complex. It made it so that they weren't  
11 getting in the habit of building them themselves. So yes, I  
12 was very much interested in Suzanne opinion.

13 Q You asked Suzanne, in her role as compliance champion,  
14 whether the sales professional generated insights were  
15 compliant?

16 A That's incorrect. My concern wasn't whether they were  
17 compliant. It was do we feel comfortable at this point, five  
18 or six months after we started this, emailing them. Do the  
19 sales professionals have enough experience at this point that  
20 we felt comfortable with that.

21 Q You asked her, "Are we good here?"

22 A Yes, that is in the email.

23 Q Now, Suzanne did not reply directly to you?

24 A That's right.

25 Q She forwarded your email to Teresa Grey?

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1 A That is correct.

2 Q Teresa Grey is the individual who works in AstraZeneca's  
3 compliance department for respiratory inhalers?

4 A That's right.

5 Q Now, as an aside, it was perfectly appropriate for Suzanne  
6 to contact Teresa Grey, right?

7 A She was free to do so at any time.

8 Q To confirm that the sales professional generated insights  
9 were compliant, right?

10 A I think that Suzanne had a misunderstanding of what I was  
11 asking her opinion for. It wasn't whether or not they were  
12 compliant. They were compliant. It was whether or not we felt  
13 that it was appropriate to start forwarding them the emails,  
14 and we had not done that previously.

15 Q It was perfectly appropriate for Suzanne to contact Teresa  
16 Grey to confirm that the sales professional generated insights  
17 were compliant?

18 A Yes, of course. As I mentioned, she was free to contact  
19 Terry Grey at any time.

20 Q And not off-label?

21 A If that was a concern that she had, of course.

22 Q Now, after reviewing Teresa Grey's email, you decided  
23 let's just not email, right?

24 A I think Suzanne and I had another conversation. I think  
25 that's a little bit of a mischaracterization. I had always

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1 been concerned about emailing insights. That's why when we  
2 started in March, we hadn't been emailing them. Those concerns  
3 remained. Suzanne shared those concerns. We spoke about it  
4 many times.

5 Q After reviewing Teresa Grey's email, you just decided,  
6 "Let's not just email them. Let's stick with what we have been  
7 doing since March," right?

8 A I think that that can be a fair characterization.

9 Q Now, since March, what you had been doing was to have  
10 telephone calls to exchange sales professional generated  
11 insights over the phone, right?

12 A I think that's a mischaracterization.

13 Q Sales representatives did, in fact, exchange sales  
14 professional generated insights over the phone?

15 A I think that might have sometimes occurred, yes.

16 Q Now, on September 4th, you determined that you were not  
17 comfortable emailing the sales professional generated insights,  
18 right?

19 A I think that's true. I wanted them to create them  
20 themselves, and I wanted them to keep them very simple.

21 Q Okay. Let's shift gears for a minute --

22 THE COURT: Mr. Oswald, before we do, it is 10 after  
23 noon. Can you give me a ballpark? I don't want to keep the  
24 jury too long for lunch.

25 MR. OSWALD: Your Honor, this is a fine place to take

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1 a break.

2 THE COURT: Ladies and gentleman of the jury, please  
3 take your lunch recess. Be back, ready to go, at 10 after  
4 1:00.

5 Thank you.

6 Ma'am, you will remain under oath when retake the  
7 stand after lunch.

8 MR. OSWALD: Your Honor, I don't want to put the  
9 witness in an awkward situation, but please remind her the rule  
10 for witnesses.

11 (Recess.)

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1 (Afternoon session; open court; jury present:)

2 THE COURT: Thank you. Please be seated.

3 Ms. DiNunzio, you are still under oath.

4 Mr. Oswald, please continue.

5 MR. OSWALD: Thank you, Your Honor.

6 BY MR. OSWALD:

7 Q Ms. DiNunzio, let's talk about a corporate integrity  
8 agreement.

9 A Sure.

10 Q You know what a corporate integrity agreement is, right?

11 A I do.

12 Q In 2008, you were aware that AstraZeneca entered into a  
13 corporate integrity agreement with the federal government,  
14 right?

15 A I believe I do.

16 Q And a corporate integrity agreement was -- that corporate  
17 integrity agreement was for off-label promotion of Seroquel,  
18 right?

19 A That is correct. That is the appropriate product.

20 Q I'm sorry?

21 A That's the appropriate product, yes.

22 Q Is that was the product that led to off-label marketing of  
23 that product -- Seroquel led to AstraZeneca entering into a  
24 corporate integrity agreement with the federal government,  
25 right?

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1 A That is right.

2 Q Now, the U.S. Department of Health and Human Services  
3 Office of Inspector General negotiates a corporate integrity  
4 agreement as part of a settlement of a healthcare program  
5 investigation arising under the federal False Claims Act,  
6 right?

7 A Right.

8 Q Providers, like AstraZeneca, agree to obligations with  
9 HHS OIG, and in exchange HHS OIG agrees not to seek the  
10 provider's -- in this case AstraZeneca -- exclusion from  
11 participation in federal healthcare programs like Medicare,  
12 right?

13 A That's right.

14 Q Now, your division's products are paid for by health  
15 insurance companies, right?

16 A In part, yes.

17 Q The insurance companies that pay for AstraZeneca's  
18 products include government insurance, right?

19 A That is right.

20 Q The government insurance contracts are standard contracts  
21 with Medicare, right?

22 A That's right.

23 Q And Medicaid, right?

24 A Correct.

25 Q Let's talk about the consequences of violating the CIA.

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1 Okay. Now, AstraZeneca's previous corporate integrity  
2 agreement with HHS OIG and its consequences were embedded in  
3 your annual training, right?

4 A That is correct.

5 Q Now, your position is that you have never engaged -- you  
6 have never asked or encouraged marketing AstraZeneca's products  
7 off-label, right?

8 A That is right.

9 Q You never asked your subordinates to ethically expand  
10 AstraZeneca's patient base in order for that increase  
11 AstraZeneca's market share?

12 A That's correct.

13 Q Your position is you never asked or even suggested to your  
14 subordinates that AstraZeneca's respiratory products have a  
15 COPD, anxiety, and depression indication, right?

16 A Absolutely not.

17 Q To do so would be improper?

18 A You are right.

19 Q It would be a violation of AstraZeneca's code of conduct?

20 A Yes.

21 Q And it would be illegal, right?

22 A Correct.

23 Q You never claimed that FARXIGA could be used to prevent  
24 primary cardiovascular event prevention, right?

25 A I did not.

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1 Q You have never talked about DALIRESP for primary  
2 prevention, right?

3 A I have not.

4 Q You would never say nor would you allow your sales reps to  
5 say, "Patients with COPD and anxiety and/or depression have  
6 higher risk of COPD exacerbation, hospitalization,  
7 rehospitalization, longer stays and mortality after  
8 exacerbation compared to those without co-morbidity," correct?

9 A In my mind, that is not an off-label claim. They are two  
10 very different things.

11 Q You would never say nor would you allow your sales  
12 representatives to say, "Patients with COPD and anxiety and/or  
13 depression have higher risks of COPD exacerbations,  
14 hospitalization, rehospitalization, longer stays and mortality  
15 after exacerbation compared to those without co-morbidity"?

16 A I would allow them to say that, because that's not a  
17 claim. That is not an off-label claim. That is an insight.  
18 That is part of engaging with insights, which is a part of our  
19 national selling model.

20 Q Now, you are aware that on May 21st, 2019, the compliance  
21 department identified two statements -- at least two statements  
22 used by field-based employees that U.S. medical leave had  
23 confirmed are not in label with the U.S. label, right?

24 A I was actually not made aware of that. That information  
25 was not shared with me.

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1 Q So you're not aware that one of those two things -- let's  
2 look at Plaintiff's Exhibit No. 77 for a minute, page 6,  
3 please. You were never made aware that one of those two  
4 statements that the compliance department identified are not in  
5 line with U.S. label was: "Patients with COPD and anxiety  
6 and/or depression have a higher risk of COPD exacerbations,  
7 hospitalization, rehospitalization, longer stays and mortality  
8 after exacerbation compared to those without co-morbidity"?

9 A This report was not shared with me.

10 Q So you would encourage your sales representatives to use  
11 this?

12 A I would not. I have a very different view of that  
13 statement. As I shared, I believe it is an insight that does  
14 not make a claim.

15 Q I see. And you know better than your AstraZeneca  
16 compliance department?

17 MS. RIECHERT: Objection. Argumentative.

18 THE COURT: Sustained.

19 BY MR. OSWALD:

20 Q Do you know better than your AstraZeneca compliance  
21 department?

22 MS. RIECHERT: Objection.

23 THE COURT: Overruled. Answer the question.

24 THE WITNESS: I believe I have a different  
25 perspective. I don't see any claim whatsoever for off-label in

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1 this statement.

2 BY MR. OSWALD:

3 Q So the field reps are free to use this statement, right?

4 A As I've shared, an insight is where you engage in a  
5 conversation with the healthcare provider that is not related  
6 directly to our product at all. As you'll see in that  
7 statement, there isn't a product name. What we're talking  
8 about, because you're asking for my opinion on this  
9 statement -- what it is saying is patients who have COPD  
10 struggle to breathe every single day. Because of that, many of  
11 them have anxiety. That's an issue for those patients. But  
12 there is no claim that any of our products treat anxiety or  
13 depression. It's just sharing simply that this is a burden  
14 that those patients have to navigate each and every day. In  
15 order to have a claim, in my opinion -- and it's just that --  
16 there has to be a tie to our product, and that just isn't  
17 stated here.

18 Q I get it. And because of that, it's okay for the field  
19 representatives to use this statement, right?

20 A It is okay for field representatives to use insights that  
21 are in compliance, aligned to brand strategy, and true. This  
22 is, in fact, a true statement.

23 Q And therefore, it is okay for your field representatives  
24 to use this statement, right?

25 A If it is compliant, aligned with brand strategy, and true.

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1 Q Ms. DiNunzio, is that a yes?

2 A I believe that this is compliant, aligned with brand  
3 strategy, and true, so yes, this is an appropriate insight. I  
4 don't love this insight. It is much too complex. You can see  
5 why I didn't like these things to be emailed. Insights should  
6 be very simple. They should be a sentence or two. This, to  
7 me, is an appropriate insight, but it is not an effective  
8 insight.

9 Q I can see why you had a concern about this being emailed.  
10 I'm with you on that.

11 A Not because it was not compliant. It was because it was  
12 much too complex in my mind. We have a limited amount of time  
13 with our customers. If you spent that time just setting up the  
14 call, you wouldn't get to anything else.

15 Q So as far as you are concerned, you would encourage your  
16 sales representatives to use this statement even today, right?

17 A I would encourage them to use insights that are compliant,  
18 aligned to brand strategy, and not untrue.

19 Q So you would encourage your sales representatives to use  
20 this statement even today?

21 A I would not. As I've shared with you, the best insights  
22 are really simple, and they are very brief. This is neither  
23 simple or brief.

24 Q So the only concern you have about it is with the fact  
25 that it is not simple and brief. That's the concern, right?

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1 A There is no tie to our product. A sales professional  
2 would not say, "SYMBICORT should be used to treat either  
3 anxiety or depression." That simply didn't happen.

4 Q Because if they did, that would be off-label and would be  
5 a violation of AstraZeneca's code of conduct and illegal,  
6 correct?

7 A Correct. But they did not.

8 Q Okay. Thank you.

9 A You're welcome.

10 Q Let's talk about things that you were not involved in.

11 A Okay.

12 Q You were not part of the decision to fire Suzanne Ivie?

13 A I was not the ultimate decider on that decision, that is  
14 true.

15 Q You were not part of the decision to fire Suzanne Ivie,  
16 right?

17 A That is correct.

18 Q You were not part of any meetings around terminating  
19 Suzanne Ivie, right?

20 A I was part of many meetings where I shared my concerns  
21 about Suzanne. Ultimately I didn't make any decisions on that.

22 Q You weren't a part of any meetings around terminating  
23 Suzanne Ivie, right?

24 A I was part of one meeting with Dawn Ceaser and Matt Gray  
25 where I, once again, reiterated my concerns and a lack of



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1 behavior modification from Suzanne. Dawn and Matt engaged in a  
2 dialogue about termination, but I was not asked my opinion nor  
3 did I offer it.

4 Q In fact, you weren't part of any meetings around  
5 terminating Suzanne Ivie, right?

6 A As I mentioned, I would say yes, because it did come up in  
7 that meeting, but it wasn't part of the active conversation  
8 that I was a part of. I was very well aware, but that wasn't  
9 my place.

10 Q Take a look at your deposition for me.

11 A Sure.

12 Q Let me know when you are on page 192.

13 A I'm there.

14 Q Line 19.

15 A Uh-huh.

16 Q "QUESTION: Were you involved in any meetings to  
17 discuss Suzanne's termination?

18 "ANSWER: I was not. I informed her team. That was  
19 the extent of my involvement."

20 Did I read that correctly?

21 A You did. I wasn't part of any meetings that were  
22 dedicated to the termination of Suzanne Ivie. There was a  
23 brief portion of one meeting where I, once again, was  
24 reiterating my concern, and Dawn and Matt had a little bit of a  
25 sidebar conversation, which I did not participate in because it

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1 wasn't my place.

2 Q You weren't involved in any conversations around the  
3 firing of Suzanne Ivie, right?

4 A I did not engage in conversations about firing  
5 Suzanne Ivie.

6 Q You made no recommendation to fire Suzanne Ivie?

7 A I did not.

8 Q After the first written warning, you had discussions about  
9 further discipline Suzanne Ivie?

10 A Could you repeat that? After the first written warning --

11 Q After the first written warning, you had no discussions  
12 about further disciplining Suzanne Ivie?

13 A I don't believe that that's correct. I do believe that I  
14 had discussions about disciplining Suzanne, but I didn't have a  
15 specific action that I was recommending. The conversations I  
16 had were about the behavior that I was continuing to see and  
17 action needed to be taken because her team wasn't getting the  
18 coaching they needed and deserved.

19 Q Let's take a look at your deposition again.

20 A Sure.

21 Q Page 186.

22 A I'm there.

23 Q "QUESTION: So after the first written warning" --

24 MS. RIECHERT: Which line?

25 MR. OSWALD: Page 186, line 12.

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1 BY MR. OSWALD:

2 Q Are you there?

3 A I am.

4 Q "QUESTION: So after the first written warning, did  
5 you have any discussions about further disciplining of  
6 Suzanne Ivie?

7 "ANSWER: Not that I recall. It definitely could  
8 have happened, but I wasn't part of that, and I knew that I  
9 wouldn't be part of that, so I don't recall any -- nobody ever  
10 came to me and asked me my opinion. Human resources never came  
11 to me. Matt never came to me. They were assessing the  
12 information they had which was information that I didn't have,  
13 and they were making their decisions based on that."

14 Did I read that correctly?

15 A Yeah. Let me clarify. I wasn't involved in the decisions  
16 about --

17 Q Ms. DiNunzio, did I read it correctly?

18 A Yes, you did.

19 Q Thank you. Now, you first learned that AstraZeneca was  
20 going to fire Suzanne just hours before she was fired, right?

21 A That's right.

22 Q Others informed you of their decision to fire Suzanne,  
23 right?

24 A Yes. There were many people involved in that decision.

25 Q Others informed you of their decision to fire Suzanne,

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1 right?

2 A I answered affirmative. Yes.

3 Q You simply accepted it, right?

4 A It was an informed situation.

5 Q You simply accepted it?

6 A I answered affirmative. Yes.

7 Q Okay. Now, let's talk about what you did do. What you  
8 did do. On January 15th, on our timeline here, you sent an  
9 email -- well, let's look at it. Plaintiff's Exhibit No. 5.  
10 You sent this email to Karen Belknap with the subject header,  
11 "Suzanne Ivie documentation," right?

12 A Yes.

13 Q Let's look at Plaintiff's Exhibit No. 9. On January 28th,  
14 you sent this email to Karen Belknap with "updated coaching  
15 activity attached," right?

16 A That's correct.

17 Q You scheduled a call for later in the week, right?

18 A It appears so, yes.

19 Q Thank you. Let's look at Plaintiff's Exhibit No. 13.

20 Now, you forwarded your January 15th Suzanne Ivie documentation  
21 email to Ms. Belknap again on February 7th, right?

22 A It looks like that's correct.

23 Q Okay. Just so we are clear on what February 7th was,  
24 that's right here on our timeline, right?

25 A I can't see that. There we go. I do believe that's

S. DiNunzio - D

1 incorrect. So my initial conversation with Karen was on  
2 January 15th. That's where I shared the initial documentation.  
3 We went through my concerns about Suzanne's coaching activity.  
4 Now, I don't know when HR created a case against Suzanne. I  
5 would not have been part of that.

6 Q Let's look at Plaintiff's Exhibit No. 13, please.

7 A Yes, I see that.

8 Q You forwarded your January 15th Suzanne Ivie documentation  
9 email to Ms. Belknap again on February 7th, correct?

10 A Yes. My initial conversation with her, with the original  
11 documentation, was January 15th. I followed up that  
12 conversation with the documentation. Then I must have  
13 forwarded it to her again.

14 Q On February 17th, you drafted a set of questions to ask  
15 Suzanne, right?

16 A That's right.

17 Q And that's Plaintiff's Exhibit No. 23. Let's look at  
18 that. These are the -- scroll down, please, Peter.

19 These are the questions that you drafted, correct?

20 A Yes. It was the first conversation I was having. I kind  
21 of wanted to make sure I was really prepared for it. So, yes,  
22 I drafted that document.

23 Q On February 18th, you emailed three pieces of  
24 documentation about Suzanne to Karen Belknap, right?

25 A I believe so, yes.

S. DiNunzio - D

1 Q And that's Plaintiff's Exhibit No. 14, right?

2 A I see that, yes.

3 Q On February 19th, you sent comments on the 2-18 Suzanne  
4 Ivie discussion. Plaintiff's Exhibit -- before we go there,  
5 this is plaintiff's -- let's just show this to Ms. DiNunzio.  
6 Plaintiff's Exhibit No. 201.

7 Is that right?

8 A This was an email that I sent to Amy Welch and  
9 Karen Belknap.

10 Q Okay. Is this an accurate portrayal of -- did you send it  
11 at the time here, February 19th, 2019, at 10:41?

12 A That was my summarization of her opportunity to respond  
13 conversation.

14 Q Is it in the same form as it was when you sent it?

15 A I believe so. There are hundreds of emails, so I believe  
16 so.

17 Q Okay. And you sent it, consistent with your  
18 responsibilities as a manager, right?

19 A It was just to share my perspective on that conversation.

20 MR. OSWALD: I move to admit Plaintiff's  
21 Exhibit No. 201, Your Honor.

22 THE COURT: Any objection?

23 MS. RIECHERT: I have no objection to it. I just  
24 didn't know we were moving to admit exhibits.

25 THE COURT: It will be received.

S. DiNunzio - D

1 MR. OSWALD: Thank you, Your Honor.

2 BY MR. OSWALD:

3 Q Okay. Now, your 18th and 19th emails that we just looked  
4 at included what you identified as Suzanne Ivie's 2018 year-end  
5 review, right?

6 A Yes. I see the attachment there.

7 Q The 2018 year-end review you sent was incomplete, right?

8 A It was complete. It was -- we don't get the performance  
9 information. We have our year-end reviews in December. We  
10 don't get final performance information until January or  
11 February. I would say it was 95 percent complete. It needed  
12 to be updated to include the year-end information.

13 Q Well, what you sent to Ms. Belknap did not include  
14 information for November or December, right?

15 A It must have been the original version.

16 Q Okay. Let's look at that Plaintiff's Exhibit No. 15.  
17 This says, "Through October, you are in the bottom 17 percent,"  
18 right?

19 A Yes. That's right.

20 Q Now, this version of the performance review didn't have  
21 Suzanne's portion, did it?

22 A No. It typically wouldn't. These were just my year-end  
23 assessment of Suzanne. Suzanne would have uploaded her version  
24 into WorkDay.

25 Q Let's scroll all the way down just to confirm that,

S. DiNunzio - D

1 in fact, it did not include anything from Suzanne's portion.

2 All right. Thank you. I want to turn to  
3 May 13th for a moment on our timeline, and so we're now here.  
4 So we are here on our timeline on May 13th, 2019.

5 Do you see that on our timeline?

6 A I don't see May 13th.

7 Q Well, it is between May 3rd and May 16th?

8 A Got it.

9 Q On May 13th you sent a "below are my concerns" email about  
10 Suzanne Ivie to Dawn Ceaser, right?

11 A I would have to see that. There have been so many emails  
12 exchanged. I would be happy to take a look and verify it for  
13 you.

14 Q Plaintiff's Exhibit No. 57.

15 A Thank you.

16 Yes.

17 Q And you included your boss, Matt Gray, right?

18 A I did. I see him.

19 Q Thank you, Peter.

20 On June 5th -- this is right here on our timeline.  
21 On June 5th, you sent an "information we discussed today" email  
22 to Dawn Ceaser and your boss Matt Gray?

23 A Yes. I continued to share my observations of Suzanne's  
24 behavior.

25 Q Let's look at that. That's Defendant's Exhibit No. 519.



S. DiNunzio - D

1 This is that email, right?

2 A That's correct.

3 Q Now, you would never independently discipline any member  
4 of your team, right?

5 A We partnered with compliance and HR to make sure that we  
6 are aligned on any kind of disciplinary actions. So, no, a DSM  
7 or a CBD does not independently discipline a sales professional  
8 or a sales manager.

9 Q You would never independently discipline any member of  
10 your team, right?

11 A I would not. I would always partner with the  
12 appropriate internal people.

13 Q In fact, to do so would be completely inappropriate?

14 A It would be.

15 Q Let's look at April 17th on our timeline for a moment. On  
16 April 17th, you removed Suzanne Ivie from her compliance  
17 ambassador role, right?

18 A That's right.

19 Q One day after she returns from family and medical leave,  
20 right.

21 A Yeah. That stemmed from two causes. First, in her  
22 year-end review, I spoke with her that it was really important  
23 for her to focus on her primary agreement, which was driving  
24 sales, because she had a poor year. And when Karen had given  
25 Suzanne her first written warning -- we also talked about that.

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1 Suzanne had shared that part of the reason that she wasn't in  
2 the field with the sales team was because she had all of these  
3 other obligations and responsibilities, and we were trying to  
4 simplify it for her so that she could focus on her role, which  
5 was coaching her sales professional.

6 Q Ms. DiNunzio, you removed Suzanne Ivie from her compliance  
7 ambassador role one day after she returns from family and  
8 medical leave, right?

9 A That's correct. But that was an action that came up  
10 through the year-end review and through the first written  
11 warning process. There was nothing surprising about that.

12 Q You have never removed another DSM from their compliance  
13 or leadership roles other than Suzanne, right?

14 A We've removed several sales professionals from their  
15 extracurricular activities for the same reason. We have had  
16 many conversations with sales professionals. These  
17 extracurricular activities, they are just that. If you are not  
18 doing well with your core responsibility of sales, we are going  
19 to strip that back a little bit. It is temporary. Once your  
20 performance rebounds, of course, we would love to have them  
21 engaged in these activities.

22 Q You have never removed another DSM from their compliance  
23 or other leadership roles other than Suzanne Ivie?

24 A Not that I'm aware of.

25 Q Now, when Suzanne returns from FMLA leave on the 17th of

S. DiNunzio - D

1 April, you required Suzanne to retrain with Blair Hanneman,  
2 right?

3 A I created a plan to help her assimilate back. There had  
4 been a lot of organizational changes while she was gone, and I  
5 wanted to make sure she was up to speed as quickly as possible.

6 Q When Suzanne returned from FMLA leave, you required  
7 Suzanne to retrain with Blair Hanneman?

8 A Yes. Through the plan we created, yes.

9 Q And with Scott Christensen, right?

10 A Correct.

11 Q With Genie Hamilton, right?

12 A Yes. I had a very talented team. All of them were  
13 willing to pitch in and help get Suzanne get back up to speed,  
14 yes.

15 Q And Andrew Maratas, who had just come off a performance  
16 improvement plan, right?

17 A He had expertise in our system and was very much willing  
18 to help.

19 Q And you required Suzanne to retrain with Andrew Maratas,  
20 who had just come off a performance improvement plan?

21 A It wasn't about requiring. It was about making sure that  
22 Suzanne had all of the information she needed so she could  
23 appropriately lead and coach her team when she came back. She  
24 was out for a period of six weeks. A lot of changes in our  
25 organization in that period of time, and it was just making

S. DiNunzio - D

1 sure she had all of the information she needed.

2 Q Ms. DiNunzio, is that a yes?

3 A Yes, sir, it is.

4 Q Now, you are aware that it is AstraZeneca's official  
5 policy to encourage employees to report to human resources when  
6 they are uncomfortable seeking guidance from or raising  
7 concerns with their immediate managers?

8 A Sure.

9 Q In a meeting on April 26th, HR told Suzanne that she  
10 should share all future complaints first with you?

11 A I do recall hearing that from HR, yes.

12 Q And you could escalate it, right?

13 A Yeah. The reason for that was because there were so many  
14 complaints. Any complaint, of course, is a subsequent  
15 investigation. That is the appropriate thing to do. Every  
16 interaction was really resulting in additional complaints and  
17 additional investigation, and it was putting HR in the position  
18 where they were mediating nearly every conversation. So that  
19 was a very difficult position for them.

20 Q Is that a yes, Ms. DiNunzio?

21 A I believe so, yes.

22 Q So if Suzanne was not satisfied with how you responded,  
23 she needed to go to your boss, Matt Gray, right?

24 A Yeah. Certainly come to me, if you have any kind of  
25 concern or problem. And if I don't provide you with

S. DiNunzio - D

1 satisfaction, absolutely go to Matt Gray.

2 Q That was the instruction given by HR, right?

3 A Yes, due to the unique circumstance.

4 Q All right. Let's talk about what you knew and when you  
5 knew it?

6 A Sure.

7 Q So, first, let's talk about what you knew at the time  
8 about Suzanne's work, okay?

9 A Okay.

10 Q You were aware of Suzanne Ivie's performance reviews when  
11 you became her supervisor?

12 A Yes, I was aware of her rating.

13 Q You knew that Suzanne delivered exceptional performance in  
14 2017?

15 A I was aware of that, yes.

16 Q You knew that Suzanne demonstrated strong leadership  
17 presence for her team, right?

18 A I hadn't observed that. I read the ratings from her  
19 year-end review, but, no, I hadn't observed that at that time.

20 Q Well, you knew Suzanne had a passion for coaching for her  
21 team, right?

22 A Of course she did, yes.

23 Q You weren't aware of any performance issues, right?

24 A At what point are you asking?

25 Q Well, at the time you became her supervisor?

S. DiNunzio - D

1 A No. I was -- at that time -- not aware of any performance  
2 issues.

3 Q In her 19-year career at AstraZeneca, Suzanne had never  
4 received a written warning, right?

5 A That is right.

6 Q In fact, she had never been disciplined at all, right?

7 A Not to my knowledge.

8 Q By the time you became her supervisor, you were aware that  
9 she had at least one circle of excellence, right?

10 A Yes. It was a wonderful accomplishment.

11 Q And was a compliance champion?

12 A That is right.

13 Q Circle of Excellence is where AstraZeneca recognizes the  
14 top five percent of its sales force each year, right?

15 A That is right.

16 Q In April 2018 you selected Suzanne Ivie to serve on a  
17 national leadership team, right?

18 A Yes. This was before I had any concerns about her  
19 coaching activity, and Suzanne indicated that she really  
20 enjoyed participating in activities like that.

21 Q In April of 2018, you selected Suzanne Ivie to serve on a  
22 national level leadership team?

23 A I did.

24 Q The reason that you selected her for the national level  
25 leadership team was because of her strong performance, right?

S. DiNunzio - D

1 A I just mentioned that she shared that she really enjoyed  
2 participating in activities like that, and that's what drove my  
3 decision.

4 Q Well, it was because of her strong performance though?

5 A Certainly that could have played a part.

6 Q Well, it did play a part, didn't it?

7 A I think that's perhaps what you're telling me. I'm  
8 telling you it certainly could have played a part for sure.

9 Q Let's refresh your recollection. Take a look at your  
10 deposition again. I don't know what page. Page 53, line 18.

11 A I'm there.

12 Q Okay. Does that help refresh your recollection as to  
13 whether or not strong performance was a factor in your  
14 decision?

15 A That aligns with what I said. It certainly could have  
16 played a role.

17 Q Now, when AstraZeneca fired her, Suzanne had been there 19  
18 years, right?

19 A That is correct.

20 Q When AstraZeneca fired Suzanne, you had been in the  
21 industry for over 19 years, right?

22 A That's right.

23 Q You intend to be with AstraZeneca for the rest of your  
24 career, right?

25 A I certainly can't predict that. I do enjoy working for

S. DiNunzio - D

1 AstraZeneca.

2 Q You enjoy working for AstraZeneca, don't you?

3 A Of course I do.

4 Q You want to make that your career, right?

5 A I don't have a crystal ball. I don't have any idea what's  
6 going to happen in my career.

7 Q As a result of Suzanne's complaints, you had to attend  
8 mandatory compliance retraining, right?

9 A That's incorrect.

10 Q You never retrained on off-label risk identification and  
11 enhanced risk mitigation?

12 A No, I did not.

13 Q You were aware, were you not, that AstraZeneca's  
14 compliance department recommended that you retrain and monitor  
15 on off-label risk identification and enhanced risk mitigation,  
16 right?

17 A As I shared with you previously, I did not see the final  
18 compliance report.

19 Q And no one required you at AstraZeneca to retrain in  
20 off-label risk identification and enhanced risk mitigation?

21 A No. All of the claims were unsubstantiated. I was not  
22 asked to complete additional training.

23 Q And obviously you didn't?

24 A Because I wasn't asked to do so.

25 Q Ms. DiNunzio, engaging with professional field



S. DiNunzio - X

1 representative generated insights was part of your selling  
2 framework in 2018 and 2019, right?

3 A That is correct.

4 Q And it remains a part of your selling framework to this  
5 day, right?

6 A Our selling framework has evolved. Over the last year, we  
7 don't call it engaging with insights anymore. It is called  
8 pre-call planning. I would say the heart of it is still there,  
9 but our selling model is always evolving.

10 Q The heart of it is still there?

11 A The heart of opening a call was a problem or a patient  
12 instead of a product was a foundation of our selling model.

13 MR. OSWALD: Ms. DiNunzio, thank you.

14 THE COURT: Thank you. Cross.

15 CROSS-EXAMINATION

16 BY MS. RIECHERT:

17 Q Ms. DiNunzio, how old are you?

18 A I'm 49.

19 Q So when Ms. Ivie was let go in 2019, you were 47?

20 A That seems right.

21 Q Where do you live?

22 A I live in Boise, Idaho.

23 Q How long have you lived in Idaho?

24 A For about three-and-a-half years.

25 Q Were you living in Idaho at the time that you supervised

S. DiNunzio - X

1 Ms. Ivie?

2 A Yes.

3 Q And at the time that Ms. Ivie was let go?

4 A Correct.

5 Q Do you have a college degree?

6 A I do.

7 Q Tell us about that.

8 A I started school at Sonoma State University. I finished  
9 at Florida International University, and I have a bachelor's of  
10 science.

11 Q When you were in the respiratory group, what were the  
12 different products when you were supervising Ms. Ivie? What  
13 were the different products that AstraZeneca and Ms. Ivie was  
14 involved with selling?

15 A Sure. It was SYMBICORT, BEVESPI, DALIRESP, Farxiga, and  
16 I'm not quite sure, it might have been FASENRA. That was in  
17 and out of the bag.

18 Q Was one of those more important than the others?

19 A SYMBICORT was always the most important.

20 Q Do you remember what percentage it was?

21 A It changed every quarter, but it was always usually around  
22 50 percent of our compensation.

23 Q I can't remember if I asked how long have you been at  
24 AstraZeneca?

25 A 14 years.

S. DiNunzio - X

1 Q You first started managing Ms. Ivie in September of 2017,  
2 I think you said?

3 A That's right.

4 Q How often would you interact with her?

5 A I had regular interactions with Suzanne, just like I would  
6 any other DSM. We had regularly scheduled one-on-ones. They  
7 were every other Friday. We would, of course, have ad hoc  
8 communications as well. Additionally, we have regional  
9 leadership calls every week, and I tried to get into each  
10 market about once a quarter. So it was very consistent  
11 communications.

12 Q How did Ms. Ivie do when you first started managing her in  
13 2017?

14 A She had a great year in 2017.

15 Q Why was that?

16 A There were a variety of reasons that Suzanne had a great  
17 year. Suzanne and her team worked in a really favorable  
18 environment. They had their biggest insurance plan. It was  
19 called SelectHealth. Our brand was a sole and exclusive. So  
20 what that meant was customers had to prescribe that product.  
21 That was part of their incentive compensation. So while  
22 Suzanne's team certainly had to service those accounts and make  
23 sure they had everything they need, it was kind of akin of  
24 selling air conditioning in the middle of the summer in south  
25 Florida. These physicians had to prescribe SYMBICORT.

S. DiNunzio - X

1 Q Did that change at some point -- her doing very well?

2 A Yeah. So she had a decent start to the year in 2018.

3 Then so for the first quarter she was in about the top half of  
4 the nation. The second, third, and fourth quarters, her  
5 performance deteriorated.

6 Q Why was that?

7 A There was a variety of reasons. It is usually not just  
8 one reason. But the primary reason was by that time, as we had  
9 discussed, generic AirDuo had been put on the formulary at  
10 SelectHealth, and it slowly over time eroded Suzanne's share.

11 Q And were these changes Ms. Ivie's fault?

12 A There were some things that were out of her control and  
13 some things that were very much in her control.

14 Q What did you expect her to do about it?

15 A I expected of Suzanne what I would have expected of any  
16 other district sales manager. When we spoke every other week,  
17 we went through a PDP -- a performance diagnosis plan. What's  
18 your current performance, whether it is good or bad? What's  
19 your diagnosis of that performance? And what's your plan? So  
20 the expectation of any DSM that's struggling with performance  
21 is they really diagnose what's behind that and come up with a  
22 plan to make it better.

23 Q Did you think of a plan that she could adopt that would  
24 improve her performance?

25 A Did I think of a plan?

S. DiNunzio - X

1 Q Yes.

2 A So I would say that really that was Suzanne's  
3 responsibility was to diagnose and plan for her district. We  
4 certainly had many collaborative discussions about it. I  
5 shared my point of view. She shared her point of view. But  
6 ultimately, it is the district sales manager's responsibility  
7 to come up with a plan.

8 Q And is your success based in part on her success?

9 A Of course. And the success of her sales professionals is  
10 based on her success.

11 Q Did she tell you what she thought the biggest issue was?

12 A Yeah. I think that we had different points of view there.  
13 So when we were getting into the second and third quarters,  
14 Suzanne really thought that it was another competitive  
15 product -- that it was BREO. I really thought it was a problem  
16 with generic AirDuo.

17 Q And did you turn out to be right?

18 A I did. Suzanne's market was evolving very quickly from  
19 that very favorable environment that I shared with you to a  
20 less favorable environment. It's really important in that  
21 situation be agile and make adjustments.

22 Q Let's switch topics and talk about the 80/20 rule.

23 A Sure.

24 Q Let's look at Exhibit No. 522. I'm going to bring it up  
25 in a second. It is the one that has been called frequently

S. DiNunzio - X

1 asked questions -- "Capturing time allocation in Veeva;  
2 frequently asked questions." Do you recall sending that  
3 document to Ms. Ivie and the other DSMS?

4 A Yes. I sent it several times.

5 Q And does it list the number of coaching days that Ms. Ivie  
6 and the other DSMS were expected in the respiratory area?

7 A Yes, it does.

8 Q Do you remember what that is?

9 A 150.

10 Q And then there are two types of coaching that's in there.  
11 One is called "coaching with customer engagement"; one called  
12 "coaching without customer engagement."

13 Did you explain the differences between those two?

14 A Sure. So coaching with customer engagement is when the  
15 district sales manager is in the field with their sales  
16 professionals. They would frequently ride in their car with  
17 them and go with them from office to office and actually see  
18 the interaction between the sales professional and the care  
19 provider.

20 Coaching without customer engagement is an activity  
21 that doesn't involve a healthcare provider. It could be a  
22 business review. It could be a follow-up between field rides.  
23 It could be pod meetings with a variety of different sales  
24 professionals. So that would be defined coaching without  
25 customer engagement.

S. DiNunzio - X

1 Q So then if you look at item 3 on the exhibit that's in  
2 front of you, it talks about the percentage of the total  
3 coaching days under "Coaching Without Customer Engagement."  
4 What was that percentage?

5 A That percentage should be equal but not more than  
6 20 percent.

7 Q What I'm calling the 80/20 rule, did that apply to all the  
8 district sales managers like Ms. Ivie?

9 A It did.

10 Q Did you think it was clear, when you sent this document  
11 out to Ms. Ivie and other district sales managers, what the  
12 80/20 meant?

13 A I do.

14 Q Do you think it was clear that it was a requirement, not a  
15 recommendation?

16 A I do.

17 Q Did anyone ever tell you that they thought it was unclear?

18 A They did not.

19 Q Now, do you think that a DSM can adequately coach from  
20 their home much of the time?

21 A I do not.

22 Q Why not?

23 A As I shared before, what our sales professionals do, they  
24 go to our customers and share the benefits of the products for  
25 appropriate patients. And I know it seems really simple, but

S. DiNunzio - X

1 that requires a great deal of skill. In order to coach to make  
2 sure that they are the best that they can possibly be, as  
3 successful as they can possibly be, you have to see the  
4 interaction. And if you don't see the interaction between the  
5 sales professional and the physician, you honestly are coaching  
6 blindly. You have no idea what their skill level is.

7 Q Ms. Ivie says that she didn't know she had to comply with  
8 the 80/20 rule. Do you believe you made it clear to her that  
9 she had to do that in 2018?

10 A I did. That rule applied to all the DSMs.

11 Q Let's look at Exhibit 522. Looking at Exhibit 522, is  
12 this an email you sent out on April 4th, 2018, to Ms. Ivie and  
13 the other DSMs on the team?

14 A Yes, it is.

15 Q And was that an agenda for a meeting that you had with the  
16 DSMs on that date?

17 A Yes. That was for our weekly leadership team meeting.

18 Q Was one of the agenda DSM coaching days?

19 A Yes, it was.

20 Q And was one of the attachments to this email that same  
21 document we saw, the FAQ document?

22 A Yes.

23 Q Was one of the attachments the DSM field coaching days?

24 A Yes. That looks like there is the DSM field coaching days  
25 report through February '18.



S. DiNunzio - X

1 Q What was that?

2 A So because this was a requirement, each month we got a  
3 report, and we really assessed where the DSMs were with the  
4 required field coaching days.

5 Q And did you send that report out to the DSMs each  
6 month?

7 A I don't know if it was each month. I would say  
8 consistently, but I don't know if it was monthly.

9 Q And why was the report created?

10 A So that we could assess where the DSMs are with respect to  
11 the coaching requirement.

12 Q Let's look at another document that you sent to the DSMs  
13 about the 80/20 rule in 2018, Exhibit 520. Looking at  
14 Exhibit 520, is this a copy of an email that you also sent out  
15 to the DSMs, this time on May 29th, 2018?

16 A Yes, it is.

17 Q And did you prepare that email?

18 A I did.

19 Q Did it have as an attachment the same frequently asked  
20 questions, FAQ time allocation, that we looked at earlier?

21 A It does.

22 Q Does it describe the difference between coaching with  
23 customer engagement and coaching without and that without had  
24 to be no more than 20 percent?

25 A The attachment -- that document was attached to the email.

S. DiNunzio - X

1 Q Then going back to the email, did you also attach the  
2 field coaching reports for April?

3 A I did, yes.

4 Q And that's the one that showed how many days you had field  
5 coaching reports for?

6 A Yes. What that report reflected -- and this is important  
7 to understand -- it didn't reflect actual field coaching  
8 reports filled out in 2018. It reflected a time management  
9 system that the DSMs to account for their time.

10 Q Did you review the field coaching reports for everyone on  
11 your team?

12 A I did.

13 Q Not just for Ms. Ivie?

14 A That's correct.

15 Q At the very -- at the second-to-last line of the email,  
16 did you say, "Please review the attachments and ensure that  
17 your time reflects the 80/20 split going forward"?

18 A I did.

19 Q Did you think you were being clear in that email about  
20 what the 80/20 rule meant?

21 A I do.

22 Q Do you think you were clear as to what coaching with  
23 customer engagement meant?

24 A I believe it is clear, yes.

25 Q Did you think you were clear about coaching without

S. DiNunzio - X

1 customer engagement, what that meant?

2 A Yes.

3 Q Do you think you were clear in your email that 80 percent  
4 of the coaching days have to be with customer engagement?

5 A Yes.

6 Q Did anyone ever tell you that they were unclear as to what  
7 it meant?

8 A They did not.

9 Q Did anyone tell you they were unclear about the 80/20  
10 rule?

11 A They did not.

12 Q Now let's go to another time you talked to Ms. Ivie about  
13 the 80/20 rule. Focus your attention on June 15th, 2018. Did  
14 you have a meeting with Ms. Ivie?

15 A It was our regularly scheduled biweekly one-on-one, yes.

16 Q Did you prepare notes of that meeting?

17 A I did.

18 Q Did you prepare them shortly after the meeting?

19 A I did.

20 Q Is it your practice to prepare notes of meetings that you  
21 have with the people who report to you?

22 A Not for every meeting. If something unusual comes up,  
23 I'll make sure I take note of that.

24 Q Let's look at Exhibit 504. Blow up the notes. Are these  
25 the notes that you prepared from the meeting that you had with

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1 Ms. Ivie on June 15th, 2018?

2 A Yes, they are.

3 Q Can you tell me what you discussed in that meeting going  
4 through these notes?

5 A Sure. It looks like we had a brief performance  
6 discussion. Then I shared with her that I had done a field  
7 coaching report review, as I did for all of the DSMs, and I  
8 shared my observation --

9 Q Slow down.

10 A I'm sorry. I shared my observations from that field  
11 coaching report review. It was clear that there were extended  
12 periods of time when no field coaching reports were submitted,  
13 and the quality of the FCR, in other words, the field coaching  
14 reports, was pretty low. They seemed to be summaries of  
15 conversations rather than summaries of observations of  
16 interactions with clinicians.

17 Q Did you point out that there were gaps during a period of  
18 time when there were no field coaching reports?

19 A That's right.

20 Q And was that a concern to you?

21 A It was. At the heart of what a DSM does is in the field  
22 coaching their sales professionals.

23 Q Did you mention that there were some field coaching  
24 professionals, like Mike Devries and Aaron Griffith, that she  
25 not have field coaching reports for?

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1 A Yes. I pointed that out.

2 Q What did you ask with respect to that?

3 A I just asked her to account for that. I didn't take note  
4 of that. She said the notes here says that she said she is a  
5 little bit more flexible with them; that these are two very  
6 talented sales professionals.

7 Q What did you respond to when she said she was more  
8 flexible with them?

9 A I asked her to be consistent.

10 Q Let's look at the last bullet point there. Tell me what  
11 you asked her.

12 A This was for -- I had a vacancy in the Spokane district.  
13 There were four territories in the Spokane district. I divided  
14 those territories between four DSMs, and Suzanne was in charge  
15 of Spokane. So this was considered like a interim DSM. The  
16 primary responsibility of an interim DSM would be communicating  
17 with that team, making sure they have all their resources that  
18 they need. Because I wanted Suzanne to focus on her primary  
19 district, I let her know it was okay for her to use an FCR to  
20 capture a conversation. However, this was the exception and  
21 should not be the case for her district.

22 Q So for the people in her district, she was not to use FCRs  
23 for distance coaching?

24 A She was not use FCRs to capture brief conversations with  
25 her sales professionals.

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1 Q Did you ask her if she was in fact using FCRs to capture  
2 distance coaching discussions?

3 A Yes, I did, and she said yes.

4 Q And what did you tell her?

5 A I told her to please refrain from doing so. The field  
6 coaching reports, those should be used to capture coaching with  
7 customer engagement.

8 Q Do you believe, after this meeting, you were clear with  
9 Ms. Ivie about what was to be expected?

10 A I do believe I was clear.

11 Q Do you believe you were clear that, outside of the Spokane  
12 area, field coaching reports were not to be used for phone  
13 conversations?

14 A Yes, that's correct.

15 Q Do you believe you were clear with her that field coaching  
16 reports had to include observations of the pharmaceutical sales  
17 specialists as they interacted with the healthcare  
18 professionals?

19 A Yes, I reinforced the policy on that.

20 Q Now, let's turn to the time you talked with the team about  
21 the 80/20 rule in 2018. In September of 2018, did you have a  
22 meeting with your team?

23 A I did.

24 Q Were coaching expectations discussed at that meeting?

25 A They were.

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1 Q What did you discuss with them?

2 A We discussed that an effective field ride should include  
3 observations of interactions with clinicians.

4 Q Did you remind people of the 150 days a year coaching and  
5 80 percent with customer engagement?

6 A I know I had a follow-up email to that, which I can't see.  
7 I'm assuming that I did, but I can't remember with certainty.

8 Q Let's jump ahead to December of 2018, December 18th, 2018,  
9 Exhibit 507. Can you tell us what Exhibit 507 is.

10 A Yeah. The following day, I was conducting Suzanne's  
11 year-end review. In addition to the year end review, I wanted  
12 to, once again, revisit my concern about her coaching activity.  
13 We had recently received the October DSM coaching days report.  
14 I gave her a summary of my observations and just asked her to  
15 be prepared for that conversation.

16 Q What did you do to prepare this document -- this email?

17 A I looked at the October DSM field coaching report.

18 Q Then did you list the coaching with customer engagement  
19 and then without for each of the first three quarters of the  
20 year?

21 A Yes. I listed my observation about half of her time was  
22 spent coaching with customer engagement and half coaching  
23 without customer engagement, which fell outside of the 80/20  
24 rule.

25 Q Did Ms. Ivie ever tell you that she was complying with the

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1 80/20 rule?

2 A She did not.

3 Q Did she ever dispute the numbers in this email?

4 A When I had the conversation with her the next day, she  
5 said she believed she was entering the information wrong in the  
6 system.

7 Q Did she ever tell you that there were times when she  
8 documented conversations in field coaching reports even though  
9 she was not riding in the field with the rep?

10 A Did she say that during that conversation?

11 Q At any time.

12 A Well, when I asked her on June 15th if she was using field  
13 coaching reports to document short conversations, she said yes.

14 Q Did you make everyone on your team comply with this 80/20  
15 rule?

16 A I did.

17 Q Did you treat Ms. Ivie the same way regarding coaching  
18 with customer engagement versus coaching without customer  
19 engagement as all the other DSMs who reported to you?

20 A I did.

21 Q In all the times you spoke with Ms. Ivie, did she ever  
22 tell you she was spending 80 percent of her time coaching  
23 people on her team with customer engagement?

24 A She did not.

25 Q Ms. Ivie said that she has worked for AstraZeneca for 16



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1 or 17 years before working for you. If she says she didn't  
2 follow the 80/20 rule then, was it a new rule that came into  
3 effect?

4 A The rule came into effect -- I'm sure there was something  
5 previous, but I wasn't in the field, so I wouldn't have  
6 knowledge or awareness of that. That rule that you shared came  
7 into effect mid-2017.

8 Q And was it particularly important that she follow that  
9 80/20 rule in 2018 when business was done?

10 A What I shared earlier was her market was evolving quickly,  
11 and it made it even more important to spend time in the field  
12 with her sales professionals.

13 Q Ms. Ivie says you sent her a number of emails about  
14 budgets in 2018, and she suggested that was the reason she  
15 didn't meet the requirement to comply with the 80/20 rule. Was  
16 that an acceptable reason for her not meeting the 80/20 rule?

17 A No. It was never communicated to Suzanne or any other DSM  
18 that there was a travel budget constraint. Certainly 2018 was  
19 a tight year for AstraZeneca, and we certainly modified some  
20 budgets, but we never asked our DSMs to decrease their field  
21 time.

22 Q Did you ever send an email to any of the DSMs or Ms. Ivie  
23 telling them to cut back on their field visits with the reps  
24 due to these budget concerns?

25 A I did not.

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1 Q If you wanted the DSMs to cut back on their coaching with  
2 customer engagement, would you have sent them an email telling  
3 them to do so?

4 A I would have. I sent them multiple emails about other  
5 budgets that we had decreased in 2018.

6 Q When you met with her to tell her the times we've gone  
7 over already and that she had to spend 80 percent of her time  
8 in the field, did she ever tell you that she didn't think she  
9 should do so because she was trying to save the company money?

10 A She did not.

11 Q Did some of the sales representatives who she supervised  
12 live in the Salt Lake City region where she did?

13 A They do.

14 Q Do you show whether she was meeting the 80/20 rule for the  
15 people in the Salt Lake City region?

16 A She was not.

17 Q And would saving money explain why she would not be  
18 meeting the 80/20 rule for the people that lived in the same  
19 town with her?

20 A It would not.

21 Q Did any of the other DSMs who reported to you stop  
22 traveling to visit and observe the sales reps who reported to  
23 them?

24 A They did not. My region was the largest region in the  
25 country. We covered much of the western half of the

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1 United States. I had folks traveling to Montana, Alaska,  
2 Wyoming. They were never told to curtail their coaching  
3 activities due to budget.

4 Q And did you have a travel budget?

5 A We did.

6 Q Did you exceed it?

7 A Always.

8 Q Was there any issues with the fact that you were exceeding  
9 the travel budget?

10 A No. Each quarter DSMs were given \$1,200 for travel  
11 regardless of their geography. For example, someone covering  
12 Colorado and Wyoming would get the same \$1,200 as somebody  
13 covering, say, Los Angeles, where they wouldn't travel at all.  
14 It was expected that my region would go over on the budget, and  
15 the EBD would manage to that national budget. I always went  
16 over travel budget. It was never a problem.

17 Q Let's turn to the December 2018 review discussion that you  
18 had. How did Ms. Ivie's district do in 2018?

19 A They had a poor year, and Suzanne and I had conversations  
20 about this several times. We are in sales; you're going to  
21 have a poor year every now and then. It is how you respond to  
22 that poor year that is really, really important. So, yeah, in  
23 the end, Suzanne's district finished in the bottom 13 percent  
24 of the country.

25 Q Did she have some sales representatives who were reporting

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1 to her who were also doing badly?

2 A That's correct. She had several sales professionals who  
3 weren't achieving their sales targets.

4 Q Do you know if she prepared performance reviews for them?

5 A During the time of the performance reviews, Suzanne was  
6 out on leave, and so I delivered those performance reviews on  
7 her behalf.

8 Q Did the two people in Boise get a two rating?

9 A They did. And there was also an individual in  
10 Salt Lake City.

11 Q And did DSMs, like Ms. Ivie, get a performance review each  
12 year?

13 A They do.

14 Q And are they rated on their performance?

15 A AstraZeneca rates DSMs on two things, performance and  
16 behaviors, and so yes.

17 Q And do you remember what percentages was performance and  
18 what percentages was behaviors?

19 A At that point performance was 60 percent; behaviors was  
20 40 percent.

21 Q Did you meet with Ivie on December 19th, 2018, to discuss  
22 her review for the year?

23 A I did.

24 Q And what did you tell her?

25 A The document that was shared, I went through it word for

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1 word with her. Additionally, we discussed her coaching  
2 activity. Additionally, we discussed some sampling issues that  
3 her district was having.

4 Q Besides the performance numbers, did you discuss any other  
5 concerns that you were having with Ms. Ivie at that time?

6 A Yeah. As I just mentioned, we discussed her coaching  
7 activity. That was the email that I sent the day before, and  
8 so she was prepared for that. Additionally, we discussed some  
9 sampling discrepancies that were occurring in her district.

10 Q Was there a discussion about the projects and the  
11 initiatives that she was working on?

12 A That was on the review. And so as I shared, I went  
13 through that pretty much word for word. So yes, we had that  
14 discussion.

15 Q What was discussed with respect to these projects and  
16 initiatives she was doing?

17 A What I shared with Suzanne at the time is what I shared  
18 with you: We are all going to have a bad year in sales every  
19 now and then. When that happens, it is important we focus on  
20 reversing that the next year. So we talked about how she had  
21 taken on a lot of activities, engagements, and while she really  
22 enjoys that, her primary responsibility to the company was to  
23 achieve her sales targets. So we talked about her stepping  
24 away from those activities so that she could focus on getting  
25 her team in a better position in terms of a performance

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1 perspective.

2 Q Let's turn to January 2019. Did you try to figure out why  
3 Ms. Ivie's district was doing so poorly and was in the bottom  
4 13 percent of the country?

5 A Of course. We had several conversations about that.

6 Q What did you do to try to figure out what the problem was?

7 A As I shared earlier, we had regular communications every  
8 other week. During that one-on-one, we followed a specific  
9 format called PDP -- performance, diagnosis, and plan. So we  
10 consistently talked about figuring out what was happening in  
11 her geography and what plan -- how to create a plan to reverse  
12 it.

13 Q Did you look at her field coaching reports for the last  
14 six months in 2018?

15 A I did.

16 Q What did you learn?

17 A So subsequent to the year-end review, whereas I shared, we  
18 talked about coaching activity as well, I wasn't satisfied with  
19 the answers that she gave me. She shared that she believed  
20 that she was putting her time in the system incorrectly and  
21 that would account for the missing FCRs. At that point I went  
22 and did a six-month review of her FCRs, so from July of that  
23 year through mid-December, and what I found was that there was  
24 a lack of coaching activity.

25 Q And can you remember in detail what you found, or shall I

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1 show you the email too?

2 A You can show me the email. It was years ago. There was a  
3 variety of things that I found. But for the days that she  
4 entered, this is the time that you put in, how many days of  
5 coaching days I had this month. There weren't field coaching  
6 reports to support that time. Let's see --

7 Q So field coaching reports for the 150 coaching days that  
8 they were supposed to do each year?

9 A Correct. I thought there was possible falsification of  
10 her coaching time in Veeva. There were instances where more  
11 than one coaching report was completed for the same day, which  
12 seemed unusual; that the FCRs were being used to document brief  
13 discussions. I could tell from the content.

14 Q Slow down.

15 A I apologize. So the field coaching reports in general  
16 were poor quality. Only 42 percent of them were in completed  
17 status, which means that they were only read by her sales  
18 professionals 42 percent of the time. Additionally, the  
19 biggest concern was the lack of live coaching in Boise, where  
20 the sales professionals were really struggling. So her airline  
21 and hotel receipts did not match the FCRs that were in the  
22 system, which, in my mind, was falsification.

23 Q And were you frustrated?

24 A I was -- I don't know if I would say frustrated. I would  
25 say a little surprised, because Suzanne and I had a really,

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1 really clear and direct conversation in June of that year. As  
2 a team, in September, we aligned that field coaching days  
3 should include observation. I was surprised that she had not  
4 modified her behavior.

5 Q And were you concerned?

6 A Of course. Her team was struggling. Her market was  
7 evolving. They needed her more than ever in 2018, and she  
8 simply wasn't meeting coaching activity expectations.

9 Q So what did you do about it?

10 A So after I completed the review, I contacted Karen Belknap  
11 and shared that I had some concerns about Suzanne's coaching  
12 activity.

13 Q And that's when you sent her this email that's  
14 Exhibit No. 5?

15 A I sent this email after a conversation I had with her on  
16 January 15th.

17 Q Let's look at Exhibit 23. You were shown this earlier.  
18 Next page. Are these the notes that you prepared to get ready  
19 for a meeting with Ms. Ivie to go over the concerns that you  
20 had with Ms. Ivie and Ms. Belknap?

21 A Yes. As I mentioned earlier, I hadn't had an interaction  
22 like this. It was an important interaction, and so I really  
23 invested time to make sure I was prepared.

24 Q Can you summarize for the jury what you planned on  
25 discussing with Ms. Ivie when you met with her?



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1 A Sure. I was starting out with some general questions  
2 about: What is your understanding of her coaching days and  
3 expectations? What does the typical field ride look like for  
4 you? Then really getting into the specifics of my  
5 observations, talking about the missing -- the times when there  
6 was no field coaching reports at all.

7 Can you scroll just a bit, please?

8 Then the intention was to go through all the  
9 abnormalities. We didn't have time for that. We really  
10 focused on the Boise team.

11 Q Did you meet with Ms. Ivie and Ms. Belknap the next day,  
12 February 18th, to go over the concerns you had?

13 A I did.

14 Q And do you recall if you asked her about the number of  
15 expected field coaching days that she was supposed to do?

16 A I do.

17 Q Do you recall what her response was?

18 A I believe she responded with "140."

19 Q What was the correct number?

20 A 150.

21 Q Did you ask her about the split between selling with  
22 customer engagement and selling without customer engagement?

23 A Either Karen or myself asked that, yes.

24 Q Do you recall what she said?

25 A My recollection is she said it wasn't until recently that

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1 she was aware of that.

2 Q Do you recall if she admitted that she did a lot of  
3 coaching without customer engagement?

4 A Yes. She did say that.

5 Q Did she say she would have a call at the beginning of the  
6 day and then leave it at that?

7 A My recollection is that Karen asked her what that would  
8 look like, and so Suzanne took Karen through a hypothetical day  
9 of what that would look like.

10 Q Did she explain why she was not spending 80 percent of her  
11 time with her reps in the field?

12 A She provided a variety of explanations. One she shared  
13 was that she was concerned about the budget. Second, she  
14 shared she was being stretched too thin along with all of the  
15 other activities and projects and initiatives that she was on.

16 Q When she told you about the budget issue, what was your  
17 response?

18 A That there had never been any communication to decrease  
19 field time due to budget.

20 Q When she said she was stretched thin, what was your  
21 response?

22 A I can't recall my response specifically. I likely  
23 referred back to the conversation we had at the year-end review  
24 where I shared my concern about that.

25 Q And when she was stretched thin, what were the things she

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1 was doing that was stretching her thin?

2 A Oh, gosh. She was involved in a variety of activities. I  
3 don't know that I can even recall them. She was on, I would  
4 say, three to five somewhat extracurricular activities.

5 Q As you left that meeting on February 18th, did you think  
6 it was clear to Ms. Ivie what your expectations were regarding  
7 how she was supposed to be spending her time?

8 A Yes, I believe so.

9 Q Did you write an email to Karen Belknap after the meeting,  
10 Exhibit 14? Did you write this email to Ms. Belknap?

11 A I did.

12 Q Can you explain what you put in this email?

13 A Yes. Could you scroll down just so I can get the context.  
14 I apologize. There are a lot of emails. I want to make sure.  
15 Thank you.

16 My recollection of this email is that Karen shared  
17 that she was going to be speaking to our human resources  
18 business partner, Amy Welch, and the reason why I wrote this  
19 email was just a summary of my documentation of Suzanne's  
20 coaching activity and her responses to our opportunity to  
21 respond call.

22 Q And then did you send her another email, Exhibit 24?

23 A That email was to Mike Hartman, my executive director at  
24 the time.

25 Q Was it forwarding an email that you had sent to Amy Welch

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1 and Karen Belknap?

2 A Yes. It was summarizing the three reasons that Suzanne  
3 cited for her lack of coaching activity.

4 Q I think we went through those with Ms. Belknap, so I'm  
5 going to save you from going through them.

6 Now, I understand that Ms. Ivie went out on a leave  
7 of absence the day after she received a written warning. Let's  
8 talk about what happened when she returned from her leave of  
9 absence. Did she have trouble accessing the coaching app.  
10 after she returned?

11 A She did.

12 Q Did you have a discussion with her about it?

13 A I did. The coaching app. is where a district sales  
14 manager writes and submits their field coaching reports.  
15 Suzanne was shut out of that system. So I asked her, in lieu  
16 of being able to write an official field coaching report, to  
17 just go ahead and follow up with the sales professionals with  
18 an email.

19 Q And was she supposed to be sending an email to you?

20 A That's what I thought was the agreement.

21 Q Did you meet with her the day she came back from her  
22 leave?

23 A The day of or the day after. I can't recall.

24 Q What do you recall you discussed with her?

25 A We discussed the transition plan, that so much had

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1 happened organizationally since she was gone, and how my  
2 approach was to divide and conquer. So the burden of bringing  
3 her up to speed wouldn't fall on one person; it would be  
4 equally divided among the team. I divided that based on  
5 expertise. For example, Blair Hanneman at the time was working  
6 with the BEVESPI brand team, and so he would be the best person  
7 to bring her up to speed with what was happening with BEVESPI.

8 Q By mid-May, after she had been back from her leave for  
9 about a month, did you have any concerns about how she was  
10 spending her time?

11 A I did.

12 Q What were those concerns?

13 A My concerns were that Suzanne had not yet modified her  
14 behavior, and so we were about a year post-conversation about  
15 her coaching activity. From what I could see, I only got one  
16 email with a follow-up to a field coaching day. From what I  
17 could see, she had not increased her coaching activity.

18 Q Did you have any concerns about her business strategy?

19 A This is in 2019?

20 Q Yes.

21 A Suzanne and I had -- my concern is I didn't know it. I  
22 didn't know what her business strategy is. It was really  
23 difficult to communicate with Suzanne during this time. She  
24 frequently missed our one-on-one discussions. She frequently  
25 missed our district or regional calls. So my concern was I

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1 just wasn't informed on what was happening with her business.

2 Q Look at Exhibit 57. Is this an email that you sent to  
3 Matt Gray and Dawn Ceaser on May 13th, 2019?

4 A Yes. This email summarizes the continued concerns I had  
5 of her coaching activity.

6 Q Let's take those three bullet points. What was your  
7 concern there?

8 A Suzanne had been back about a month at this point. In  
9 that month, I had one one-on-one with her. She hadn't  
10 completed any field coaching reports, and she only submitted  
11 the one email. And without consistent communication, I was  
12 uncertain how she was leading her team and diagnosing and  
13 planning for the business.

14 Q Was she meeting your expectations at that time?

15 A She was not.

16 Q Was she doing the job that she was supposed to be doing?

17 A I do not believe so.

18 Q Did you meet with Dawn Ceaser and Matt Gray on June 5th,  
19 2019?

20 A I did.

21 Q Where was that meeting?

22 A It was in Wilmington, Delaware.

23 Q Let's look at Exhibit 519. Is this an email that you sent  
24 to Dawn Ceaser and Matt Gray after the meeting on June 5th,  
25 2019?

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1 A Yeah. I remember the meeting really well. We were in a  
2 very, very small room, and this was about eight weeks after  
3 Suzanne came back from leave. This summarizes the concerns  
4 that I continued to have. So she, at that point, eight weeks  
5 back, she had only participated in two leadership calls. She  
6 had not completed any field coaching reports, and she had only  
7 participated in two one-on-ones with me. So our communication  
8 was somewhat infrequent.

9 Q Her employment was terminated the next day. I think  
10 you've gone through your role in connection with that.

11 Did you agree with the decision to terminate her  
12 employment?

13 A While I wasn't a decider, I did agree with that. We were  
14 a year after I had shared my initial concerns with Suzanne  
15 about her coaching activity. In my mind, she was still not  
16 meeting the basic expectations of a DSM.

17 Q And did you think this was having an effect on her team?

18 A That's what really -- throughout this whole thing, this  
19 was incredibly challenging. What motivated me to keep going in  
20 the face of a lot of adversity was the eight sales  
21 professionals that reported to Suzanne. These were are great  
22 people, they work really hard, and they were not getting the  
23 coaching and leadership that they needed and deserved, and they  
24 were really struggling.

25 Q Who took over Ms. Ivie's role as the DSM of Utah? I don't

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1 know if I even asked you what her territory was.

2 A Salt Lake City district.

3 Q Did she also cover southern Idaho?

4 A Southern Idaho and a portion of eastern Oregon.

5 Q So who took over her role as the DSM for Utah and southern  
6 Idaho?

7 A We went through a formal interview process, and  
8 Chris Thomsen was selected to be the new DSM.

9 Q How has the district done since she left?

10 A Exceptionally well.

11 Q Do you have any reason to believe that he is not meeting  
12 the 80/20 rule?

13 A I have no reason to believe that. I am no  
14 longer Chris Thomsen's direct supervisor, but I certainly  
15 inspected his coaching activities, just like I did Suzanne's,  
16 and he was meeting expectation.

17 Q Was he showing observations?

18 A His field coaching reports were one of the best I've seen.  
19 They were summaries of the interactions that he saw with  
20 healthcare prescribers, in addition to what the sales  
21 professionals were doing well and where they needed to grow,  
22 and that's what the coaching is all about.

23 Q Did they show that he was having in-person meetings  
24 between the PSSs and the health care professionals?

25 A They did.



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1 Q Did you ever look at his expense reports to see if he was  
2 traveling to Boise?

3 A I didn't use expense reports to assess travel. I used  
4 them to make sure that the expenses were compliant.

5 Q How did the Boise reps do after Ms. Ivie left?

6 A They have done really well. The team has transformed  
7 significantly through a couple of reorganizations, but they  
8 have done really well.

9 Q If you could look at Exhibit 538. Can you tell us what  
10 this shows and who scores these are?

11 A This is the summary of my Pulse survey results.

12 Q What's that?

13 A A Pulse survey is a survey taken every six months at  
14 AstraZeneca to really assess -- the heart of it is: Is  
15 AstraZeneca a great place to work? It is a 15-minute survey,  
16 and we get the results on a regional level. What this reflects  
17 is that in the spring of 2019, our Pulse survey results were  
18 not very good. By the time -- a year later, they had increased  
19 significantly, which reflects that people believed that the  
20 Seattle region was a great place to work.

21 Q Now, I am going to switch topics again. We are going to  
22 talk about the complaints that Ms. Ivie made against you.  
23 Let's talk first about the complaints she made against you  
24 after she returned from leave. Then we will go back to the  
25 other one.

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1 A Okay.

2 Q Let's talk about the complaints she made to Karen Belknap,  
3 and I'm not going to ask you about all of them, because  
4 Ms. Belknap has already gone through all of them. Did you  
5 learn that Ms. Ivie made complaints about you right after she  
6 returned from leave?

7 A The first time that I was made aware that Suzanne had made  
8 any complaints about me was on February 21st. I remember it  
9 because I was in an airplane at San Francisco airport.

10 Q Hold on a second. I think we are talking about different  
11 things. I'm talking about when she comes back from leave.

12 A Oh, okay.

13 Q Then we are going to come back.

14 A Tell me more. I'm not following.

15 Q When she comes back from leave, did you hear from  
16 Ms. Belknap that she had made further complaints about you?

17 A I did.

18 Q I am not going to go through all of them, because  
19 Ms. Belknap did. But one of the things she complained about  
20 was the number of field days had increased to 160 from 150.

21 A I'm following you now, yes.

22 Q Can you explain that?

23 A Yes. That was a decision that was made by executive sales  
24 leadership. I was not involved in the decision to increase  
25 field coaching days.

S. DiNunzio - X

1 Q And then she complained about the fact that other people  
2 were being asked to train her on branding messages and other  
3 things. Did you ask other people to do that?

4 A I did.

5 Q And did you think that was inappropriate or retaliatory,  
6 or what was your purpose in doing that?

7 A I did not. I believe it leveraged the strength of the  
8 sales managers on my team.

9 Q Did she complain that she had to receive training on a  
10 new disease state?

11 A Yes. We were engaging in a disease state awareness, so  
12 the whole field force was trained on that while Suzanne was out  
13 on leave, and she had to be trained on it as well.

14 Q Did you hear that she had complained that you had taken  
15 leadership roles away from her?

16 A Yes.

17 Q And what was your response to that?

18 A The removal of those roles was in line with her year-end  
19 review and her first written warning.

20 Q Did you take the compliance ambassador role away from her?

21 A I did.

22 Q What was the reason you did that?

23 A The same answer. That was aligned with her year-end  
24 review, so she could focus on her core responsibilities of  
25 achieving her sales target and the first written warning.

S. DiNunzio - X

1 Q So did this leadership academy that she was in, did that  
2 come with any extra money?

3 A It did not.

4 Q How about the compliance role? Did she get paid extra for  
5 that?

6 A It did not.

7 Q Is that like a rotational role?

8 A No. Really, every district sales manager on a team has  
9 some additional responsibilities. It is a way that they  
10 contribute to the organization, and that's the responsibility  
11 that Suzanne had. There is no additional compensation with  
12 people who work with our trainers, people who work brand leads,  
13 people who work with our leadership advisory council. This was  
14 pretty typical.

15 Q Let's look at Exhibit 523. Can you tell us what this is?

16 A This is an email from January 2019 -- and I'm just going  
17 to -- can you scroll down?

18 It looks like it was a follow-up to a conversation  
19 that I had with Suzanne. We talked about her field coaching  
20 reports once again and how she could make them more effective.  
21 Additionally, we had a discussion about people, and we also  
22 discussed projects that she was working on and agreed that  
23 she'd stay on the leadership academy through the meeting in  
24 eight weeks and then only work on compliance and project  
25 development for the rest of the year. So we kind of aligned

S. DiNunzio - X

1 ourselves on the projects she would peel off of.

2 Q At the time you wrote that email on January 22, did you  
3 know that she had filed a compliance complaint against you?

4 A I did not.

5 Q I'm still focusing now on the complaints that she made  
6 after she returned from her leave of absence. Did you  
7 understand that after Karen Belknap left and Dawn Ceaser took  
8 over the role, that Ms. Ivie continued to make complaints about  
9 you?

10 A I'm aware of the continued complaints.

11 Q And did you hear from Ms. Ceaser that one of the  
12 complaints was that she was not in a group photo?

13 A I did.

14 Q And was it true that she wasn't in a group photo?

15 A Yes. We had a leadership team meeting in Salt Lake City.  
16 She wasn't present. She had taken vacation time. We were  
17 really excited to celebrate the impending birth of one of  
18 manager -- it wasn't his birth -- it was his wife's birth.  
19 They were having a baby. So we were having a celebration at  
20 lunch and took a picture. Suzanne wasn't in the picture  
21 because she wasn't present at the meeting.

22 Q Did you hear from Dawn Ceaser that Ms. Ivie was  
23 complaining that you had discriminated against her because of  
24 her age?

25 A I did.

S. DiNunzio - X

1 Q Were you told that she had complained to human resources  
2 that you gave her the nickname "Benatar"?

3 A I was aware of that.

4 Q Had you given her that nickname?

5 A I did.

6 Q When had you done that?

7 A That occurred in -- right when I became a new director.  
8 It was a way to have some fun and build connection with the  
9 team. That occurred in late 2017 perhaps, early 2018.

10 Q So a long time before this complaint in May of 2019?

11 A It was about a year-and-a-half.

12 Q Were you surprised that she was complaining about this in  
13 May of 2019?

14 A Yeah. When she was given the nickname, she seemed really  
15 pleased with it. The reason that she was nicknamed "Benatar"  
16 is because we had used, in January 2018, some high school  
17 photographs of the leadership team to introduce us. She had  
18 this amazing photograph where she just looked like a rocker.  
19 That's her in the middle. Additionally, she is a gifted  
20 pianist. So blending that photograph with being a musician,  
21 Pat Benatar is a great name. She is a classic iconic female  
22 rocker.

23 Q Did you have some text messages with her? Let's look at  
24 Exhibit 542.

25 A Yes, I did have text messages with her.

S. DiNunzio - X

1 Q We are going to look at 848 to 849, I think. While we are  
2 getting the text messages up, what do you recall of those text  
3 messages?

4 A I recall she liked the name; that she said she was going  
5 to listen to some Pat Benatar songs later that day.

6 Q Did the fact that you picked Benatar as her nickname, did  
7 that have anything to do with age?

8 A It did not. It had to do with that great photograph and  
9 her musical ability.

10 Q Did you have any reason to believe that she didn't like  
11 the name?

12 A No, I did not. She never shared any concerns about it.

13 Q Did you have any reason to believe she was embarrassed by  
14 the name?

15 A I did not.

16 Q Did she ever suggest any other nicknames to you?

17 A She did not.

18 Q She claims that you told her to "lighten up" and that  
19 "it's really funny." Did you say that to her?

20 A That didn't occur.

21 Q She said she told you that in a professional setting she  
22 preferred to be called "Suzanne." Did she tell you that?

23 A That also did not occur.

24 Q Did you ever tell -- did she ever tell you that she didn't  
25 want to be called "Benatar"?

S. DiNunzio - X

1 A She did not.

2 Q And if she had told you that, what would you have said?

3 A I would have stopped immediately.

4 Q Okay. We have got our text messages up here. Let's look  
5 at 848 and 849.

6 Let's look at these text messages. What was your  
7 name at the time, or what was you your maiden name, or the name  
8 you were using?

9 A Orgren.

10 Q In the top message here, is that a text that you sent to  
11 Ms. Ivie?

12 A Yes, it is.

13 Q And you asked her which of these four was her favorite  
14 nickname?

15 A Uh-huh. I did.

16 Q And is the one below the text that she sent back to you?

17 A Yes, it is.

18 Q And this is January 11th, 2018?

19 A Yes, it is.

20 Q She says, "Wow. How do you choose? Benatar, *Hit Me With*  
21 *Your Best Shot*." Do you know what that was?

22 A That was a song.

23 Q And then, "Stevie Nicks went to the high school. Joplin  
24 died. Joan Jett. I would love to have Benatar, Nicks, Joplin,  
25 and Jett in that order."



S. DiNunzio - X

1           Anything that that led you to believe she didn't want  
2 the nickname "Benatar"?

3       A     No. And certainly if she said I don't want a female  
4 rocker name, she could have certainly have said that, and it  
5 would be fine.

6           THE CLERK: For the record, that's Exhibit 539?

7           MR. MCCARTHY: Correct.

8           MS. RIECHERT: I had the wrong exhibit number.

9       BY MS. RIECHERT:

10       Q     Did you ever call her "Benatar" in front of customers?

11       A     No. I don't know that I ever was in front of customers  
12 with Suzanne.

13       Q     So it is just something you used between you on the team?

14       A     Yeah. When we initially did nicknames -- and not everyone  
15 had one. It was used a little bit at first, but it was nothing  
16 that was consistently used.

17       Q     Did Mr. Hinson have a nickname?

18       A     He did not.

19       Q     Do you know why not?

20       A     The nicknames came about really organically. There were a  
21 couple of members of the team who didn't have nicknames, just  
22 because the inspiration didn't strike. So he just didn't have  
23 one because nothing came about.

24       Q     Did you also learn from Dawn Ceaser that Ms. Ivie had  
25 complained that you had made a comment about her appearance?

S. DiNunzio - X

1 A I did.

2 Q Ms. Ivie says you said to her, "You're aging really well,"  
3 and "I thought you would have more wrinkles."

4 Did you say this or anything like this to Ms. Ivie?

5 A I didn't. I wouldn't make a comment like that in a  
6 professional setting.

7 Q Did you comment on her lack of wrinkles?

8 A I did not.

9 Q Did you find out from Ms. Ceaser when you supposedly made  
10 this comment?

11 A I don't recall.

12 Q Did you think of Ms. Ivie as older?

13 A I did not. We are roughly the same age.

14 Q Did you have others on the team who were roughly the same  
15 age as well?

16 A Certainly. Scott, Blair -- we were all about the same  
17 age -- Larry.

18 Q Did you hire someone on the team who was about the same  
19 age?

20 A Yes. I hired Susan O'Brien.

21 Q Let's look at Exhibit 73. Is this an email that you sent  
22 to Dawn Ceaser and then forwarded on to your boss that talked  
23 about the nickname issue?

24 A Yes. Dawn had called me and asked me to just explain the  
25 background behind the nicknames. I did so, and she asked me to

S. DiNunzio - X

1 capture that in an email, which I did.

2 Q Look at Exhibit 92. Did you learn that Ms. Ivie had  
3 appealed the written warning that she received?

4 A I did learn that. I don't recall quite when.

5 Q Were you interviewed -- do you remember who conducted the  
6 appeal of the written warning?

7 A I don't. I really wasn't part of those conversations. I  
8 do recall having a conversation with Linda Abbonizio.

9 Q Let's go to 6-5-19. It says, "EPP spoke with CBD  
10 DiNunzio." Look at that and tell me if that seems like an  
11 accurate discussion of your conversation with Ms. Abbonizio  
12 about the appeal from the written warning.

13 A Yes. That is an accurate representation of the  
14 discussion.

15 Q Did you then send her an email, Exhibit 509 -- looking at  
16 Exhibit 509, is that a copy of an email that you sent to  
17 Ms. Abbonizio, forwarding to her an email that you had sent to  
18 the team earlier?

19 A Yes. She asked me to send this email to her. That was a  
20 summary of the leadership meeting we had in September where we  
21 discussed the components of a successful field ride including  
22 observations.

23 Q All right. So now I'm going to go back and switch topics  
24 and go back in time to the December 19th, 2019, complaint  
25 against you.

S. DiNunzio - X

1 A Okay.

2 Q We have talked about the ones after the leave. Now I'm  
3 going to go back. When was the first time that you learned  
4 that Ms. Ivie had filed an EthicsPoint complaint against you?

5 A Now I'm tracking with you. Sorry about that. The first  
6 time I did learn about that was February 21st, 2019. I  
7 remember really specifically, because, as I mentioned, I was  
8 sitting in an airplane going to visit my mother. We have all  
9 been in that situation, where they're closing the doors and  
10 tell you to hang up, and that's when I got the phone call from  
11 Karen and Amy that Suzanne had some concerns about my  
12 leadership.

13 Q And Ms. Belknap had never told you about that before?

14 A It was the first I heard of it. I was surprised. They  
15 didn't share the scope. They didn't share any details. They  
16 just said there would be an investigation and they would let me  
17 know the outcome.

18 Q And Mr. Hartman had never told you anything about it  
19 before?

20 A He had not.

21 Q Were you interviewed on March 1st, 2019, about the  
22 complaints?

23 A I was.

24 Q And was that the first time that you learned about what  
25 the complaints were about?

S. DiNunzio - X

1 A It was.

2 Q And who had made them?

3 A Yes. That's correct.

4 Q And who interviewed you?

5 A It was Karen Belknap for the HR complaints and  
6 Mike Pomponi for the compliance complaints. There was also a  
7 woman from England. I'm sorry. I don't remember her name.

8 Q Tell us, as best you can recall, about that interview  
9 experience.

10 A Yeah. That was a really stressful situation. I knew that  
11 they were going to interview me. I didn't, like I said, know  
12 about the complaints. Karen started first. She talked about  
13 the human resources complaint, the things like age  
14 discrimination, that kind of thing, and then Mike Pomponi  
15 followed up with the complaints that related to compliance  
16 concerns.

17 Q Were you asked by Ms. Belknap whether you had used the  
18 phrase "old bus/new bus" or "old pharma/new pharma"?

19 A Yes, I was.

20 Q Had you used those phrases?

21 A Yes, I had.

22 Q Where had they come from?

23 A So in December of 2018 -- at the end of every year we have  
24 a leadership meeting, just to align our strategy for the  
25 following year and to build some plans, and to build some

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1 excitement. On the second day of the meeting, we were working  
2 on that plan. We had a very traditional white-boarding/  
3 brainstorming session. What we were talking about was mindset;  
4 how it's really important to have a growth mindset. So we were  
5 trying to come up with ways, rather than just saying "fixed  
6 mindset" and "growth mindset," how can we illustrate that or  
7 how could we say that in a way that would resonate with the  
8 sales professionals? We went back and forth on a bunch of  
9 ideas. At some point "new bus/old bus" came up. We scrapped  
10 that. We didn't plan on that. Then we ended up with a theme  
11 for the year called "IOUW." Suzanne played a big part in  
12 coming up with that. It was, "In it, own it, up it, win it."

13 Q And where did this idea of "old pharma/new pharma" come  
14 from?

15 A It was a book by Jim Collins, *Good to Great*. It talked  
16 about -- gosh, this was a really long time ago. It talked  
17 about the importance of constantly evolving, having the right  
18 people on board, having the right mindset. It is a classic  
19 leadership book.

20 Q Did you give a presentation to your team in which you used  
21 this phrase "old pharma/new pharma"?

22 A Yes. So in our kick-off call of January of 2019, I did  
23 have a conversation about what that meant. I find that giving  
24 examples of behavior is really important. So I gave several  
25 examples of what does "old pharma" mean? It very much means

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1 having a fixed mindset. And what does "new pharma" mean? And  
2 that means having a growth mindset. So these were the examples  
3 that I used to reinforce that behavior.

4 Q Does this have anything to do with age?

5 A No. And I was clear in the meeting on that. I said that  
6 very specifically.

7 Q Were you referring to Ms. Ivie as the "old bus"?

8 A I certainly was not.

9 Q Did you do anything to say or suggest that Ms. Ivie was an  
10 "old bus" or a had the "old pharma mindset"?

11 A I did not.

12 Q Now, during this interview you had on March 1st, were you  
13 asked about a prescription bottle that had a customer's name on  
14 it?

15 A I was.

16 Q What do you recall the story or the explanation being --  
17 the concern being and then the explanation about that  
18 prescription bottle?

19 A I believe the concern was a privacy concern. Like every  
20 other team, we have a group text thread that we communicate  
21 with regularly. One of the sales leaders had captured a  
22 picture of a prescription. It was of a paper that you get when  
23 you go to the pharmacy. I believe it was for SYMBICORT. The  
24 patient's name on top was blacked out.

25 Q Did you understand that Ms. Ivie was making a complaint

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1 about the fact that this prescription bottle had been  
2 circulated amongst the DSMs?

3 A I was aware of that.

4 Q And do you remember when that was that that prescription  
5 bottle was circulated?

6 A I don't. I'm sorry. I don't remember when that was.

7 Q How about in relation to the December 19th complaint?

8 A I honestly don't know. I mean, the other day I was in a  
9 physician's office, and I came out to 37 text messages. So the  
10 communication -- the pace is so fast. I don't recall the  
11 timing.

12 Q Did you see the customer's name on the prescription  
13 bottle?

14 A I didn't. I looked at it very quickly. I remember I was  
15 in Las Vegas with a very talented sales professional. We were  
16 grabbing a quick bite to eat in a very, very loud place. I  
17 looked at it quickly. I saw that the name had been crossed  
18 off, and I just waved forward.

19 Q Did Ms. Ivie raise this as a concern with you at the time?

20 A She did.

21 Q Did you find out why this prescription bottle had been  
22 circulated?

23 A Yeah. As it turns out, it was -- the name of the patient  
24 was listed in two places -- on the top and on the side. I  
25 didn't see the name on the side, but Suzanne did. It was the



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1 name of one of our sales professionals, and he had given his  
2 manager permission to share that.

3 Q Did you consider that a concern?

4 A I really didn't. I very quickly assessed it. I saw the  
5 crossed-off name and thought that -- it was from Genie. I  
6 remember very well. I thought that she actually showed intent  
7 that she was trying to protect the privacy of that person.

8 Q When you were interviewed by Ms. Belknap and Mr. Pomponi  
9 on March 1st, 2019, did you learn that Ms. Ivie was accusing  
10 you of promoting off-label marketing?

11 A I did.

12 Q Was that the first time that you had learned there was an  
13 accusation of promoting off-label marketing?

14 A It was. And I would have to say that was the biggest  
15 concern. An accusation of off-label marketing is massive. The  
16 repercussions for myself, every sales professional in the  
17 region, every DSM in the region were huge. So that was the  
18 thing that surprised me the most, the off-label allegation.

19 Q Had Ms. Ivie ever said anything to you that she was  
20 concerned that you were promoting off-label?

21 A She never did.

22 Q Did anyone else ever tell you that they were concerned  
23 that you were promoting off-label?

24 A They never did.

25 Q Did you ever do or say anything to anyone to suggest that

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1 the sales reps in your region should promote off-label?

2 A Absolutely not.

3 Q What would be the consequences if you would have done so?

4 A As I said, the consequences to every individual involved  
5 would be really big. Beyond that, the consequences to the  
6 organization would be massive. It is illegal to promote  
7 off-label. It is inappropriate and illegal.

8 Q And did you ever learn that any of the sales reps who  
9 worked for DSMs, who worked for you, had ever sold off-label?

10 A I had not.

11 Q What would have happened to them if they had?

12 A It would have been immediately reported and investigated.

13 Q So let's go through some specific complaints that Ms. Ivie  
14 has made against you. She claims that in a meeting of the  
15 entire team that you proposed that the team promote DALIRESP as  
16 a prevention medicine?

17 A Uh-huh.

18 Q Did you ever do that?

19 A I did not.

20 Q Are you sure?

21 A I can provide you additional context, but, no, I did not.

22 Q How can you be sure?

23 A So the reason that Suzanne had that impression -- once  
24 again, going back to our end-of-year meeting, each year the  
25 brand team shares their strategy. Part of their strategy is

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1 really reinforcing the unmet need. I'll give you an example.  
2 This was a statement. The brand team shared the statistics  
3 that 50 percent of patients die within 3.6 years of their first  
4 hospitalization for COPD exacerbation. COPD exacerbation is  
5 like a lung attack. It is sort of like a heart attack for the  
6 lungs. That was a fact that the executive director of  
7 marketing had shared with the commercial director, my peers, a  
8 couple of weeks prior.

9           The reason they share this prevalence data/  
10 statistical data is to constantly reinforce to us that what we  
11 do matters. What we do is meaningful. There are patients that  
12 have significant lung ailments and our medications can help  
13 them. But that's not off-label. We didn't say that statistic  
14 to a clinician. We merely shared it in a meeting to prepare  
15 for the year.

16           Additionally, there was a brand slide. On top of the  
17 brand slide that was created by the brand and not myself, there  
18 was a header that said "HCP" -- that stands for healthcare  
19 provider -- "HCP treatment exacerbation, lung attacks,  
20 reactively rather than proactively." I think that's where  
21 Suzanne got her concern. Now, she missed that portion of the  
22 meeting. She had a call, but I had a follow-up call with her.  
23 I think she deduced that we were trying to sell it for  
24 primarily prevention, and that wasn't the case at all. What  
25 that meant was that once a patient has been diagnosed with

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1 COPD, that means they have had an exacerbation. Every time  
2 they have an additional exacerbation, their lungs are  
3 remodeled. They're never ever the same. You can't fix it.  
4 There is nothing you can do about it. So it was important that  
5 physicians treated COPD proactively rather than waiting for an  
6 exacerbation to happen, throw a bunch of drugs at it, which is  
7 what they did, put the appropriate patient on DALIRESP so that  
8 we could avoid the exacerbation, so we could avoid the lung  
9 remodeling, and so we could avoid the hospital admission.

10 COPD is a devastating illness. DALIRESP was the only  
11 oral medication that's been proven with patients with severe  
12 COPD with a history of exacerbations to prevent additional  
13 exacerbations. It is a very meaningful medicine. That was a  
14 lot of information, but the context is important on that.

15 Q Ms. Ivie was also claiming that you had told the team at  
16 the same district meeting that they should tell doctors that  
17 50 percent of all COPD patients die after the first  
18 exacerbation. What does that mean?

19 A That was the statistic that I just shared with you. That  
20 statistic was shared with directors by Domenick Fanelli, who is  
21 the executive director of marketing of respiratory health at  
22 AstraZeneca, and that was that prevalence statistic to really  
23 help us -- what's the word I'm looking for -- internalize the  
24 unmet need; the problem we were trying to solve.

25 Q Did you later learn the results of the investigation?

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1 A I did.

2 Q What were you told?

3 A So my interview was on March 1st. I got the results on  
4 April 26th. It was the longest weeks of my career. It was  
5 awful. Then I was told that all of the allegations were  
6 unsubstantiated.

7 Q Let's look at Exhibit 25. Your interview was on  
8 March 1st. Did you then send an email -- this email to  
9 Mr. Pomponi on March 1st?

10 A This was from a different year. No, I got you. I'm  
11 following you.

12 Yes. Part of the compliance investigation was for  
13 engagement with insights, which, as I shared, was part of the  
14 AstraZeneca selling framework. We kicked off that initiative  
15 in March of 2018. I had written several follow-up emails just  
16 to make sure that we were engaging in that activity  
17 appropriately. This was a follow-up email that I had the DSMs  
18 in March right after we kicked off that initiative.

19 Q Then let's look at Exhibit 505. Is this another email you  
20 sent to Mr. Pomponi after your interview in March of 2019?

21 A Yeah, it is. As I shared, I was really surprised by the  
22 off-label allegations. I had never engaged in that type of  
23 activity. I went into that interview being told, not knowing  
24 what the complaints were. And I don't know about you, but I'm  
25 a processor. When the interview stopped and I had some time to

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1 really think about the information that had been shared with  
2 me, I just followed up with him on the DALIRESP complaint and  
3 just shared some of my additional thoughts on that.

4 Q Did you explain what you went through in this email?

5 A Let's see here. So Suzanne alleged that I had made the  
6 off-label claims at her district meeting in January of that  
7 year. I shared with Mike that I was at that meeting for about  
8 two hours. For the first hour she talked about -- she went  
9 around the room and asked all of her sales professionals their  
10 goals for 2019. Then for the second hour I presented what's  
11 called "The AZ Story," and that's what is really coming up for  
12 AstraZeneca in the coming few years. So it wasn't even really  
13 product specific. It was very much organization specific. The  
14 slides from that meeting were slides that -- she provided the  
15 deck to me. Then I provided slides 8 through 22, which was  
16 "The AZ Story." Certainly we talked about SYMBICORT, which is  
17 our most important product. I'd be very surprised if I even  
18 mentioned DALIRESP once or twice. DALIRESP was a tertiary  
19 product. It was never rated more than 10, 15, 20 percent of  
20 our incentive compensation. So, yeah, that's the summary of  
21 the meeting.

22 Q And you reiterated there that you did not discuss  
23 off-label promotion of DALIRESP?

24 A I did not.

25 Q I'm about to switch subjects. Should we take a break or

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1 keep going?

2 THE COURT: How much longer?

3 MS. RIECHERT: Three-quarters of an hour.

4 THE COURT: We will take our break. Please don't  
5 discuss anything about the case with each other or anybody  
6 else.

7 Thank you. 15 minutes.

8 (Recess.)

9 (Open court; jury present:)

10 THE COURT: Thank you. Please be seated. I  
11 apologize for the delay. We had a little technical difficulty.

12 Continue, please.

13 BY MS. RIECHERT:

14 Q I'm going to switch topics to talk about your favorite  
15 subject of engaging with insights.

16 A Great.

17 Q Give us some examples of insights.

18 A Yeah. An insight should be a simple -- an insight is a  
19 simple statement that a sales professional would use to enter  
20 into a conversation with a health care provider.

21 In the summer of 2018, right after we started working  
22 on engaging with insights, that was the year that there were a  
23 wildfires in Montana, and the air quality was absolutely  
24 terrible for patients with asthma. As an example of an  
25 insight, a professional would say is, "The air quality this

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1 morning is really horrible. As you think about your vulnerable  
2 patients with asthma and COPD, how does this change how you're  
3 currently treating them?" That's it. It is that simple.

4 Another example could be something like -- I talked  
5 about -- we were getting ready for a September campaign.  
6 September is a really important time for patients with asthma  
7 and COPD due to what is called the September epidemic. What  
8 that might sound like is this: "Doctor, as you know, all the  
9 kids are going back to school in September. And when they go  
10 back to school, they will be exposed to all kinds of viruses  
11 and bacteria, and they will bring that home to their  
12 grandparents and aunts and uncles and their parents, and so for  
13 those vulnerable patients who have compromised lungs, what  
14 steps are you taking to make sure they are protected?" So that  
15 would be another example of an insight.

16 So it is simple, it's straightforward, and it really  
17 is a way of entering into a conversation that promotes a  
18 two-way dialogue.

19 Q And was it part of AstraZeneca's official selling strategy  
20 to use these insights?

21 A Yes. At the time our selling model was called "The One  
22 Easy Selling Framework," and yes, it was one of the steps.

23 Q And did Ms. Ivie use these types of things before  
24 AstraZeneca made them part of its sales strategy?

25 A Yeah. Suzanne, she is very creative. That's one of her



S. DiNunzio - X

1 strengths. She used to utilize a technique that she called  
2 "fun facts." It was really just engagement with insights. It  
3 was the same thing. You would enter into a conversation with a  
4 simple fun fact. In Salt Lake City, a fun fact could be  
5 about -- what are those things called when the air is bad? I  
6 can't remember what it is called. But somehow Salt Lake City  
7 is in a valley, and air pollution can get trapped, which is  
8 really bad with patients for COPD and asthma. So they could  
9 point out to the air quality as well. So Suzanne had been  
10 doing this for some time before it was official and was really  
11 proud of it. It is a very effective technique.

12 Q Did she express to you any concern about using these  
13 "fun facts" with the doctors?

14 A Suzanne and I had multiple conversations when we were  
15 rolled it -- finished it out to the region. Our concern was  
16 people making them overly complex; not keeping them really  
17 simple. Another strength of Suzanne is she is very good with  
18 simplicity, and it's one of the reasons I consistently asked  
19 her opinion on things like this. So, yeah, we had talked about  
20 we wanted it to be really simple. We wanted people to focus on  
21 one insight or two. You don't need a list of 20 insights that  
22 you've come up with, and, of course, all the rules, on-label,  
23 not misleading, and aligned with brand strategy.

24 Q So let's look at Exhibit No. 508. Can you tell us what  
25 this is?

S. DiNunzio - X

1 A This is an engagement insight worksheet. This was created  
2 by our training department. It is not something that we  
3 created within our region, and it really just enforces the  
4 training that we put the sales professionals through in March  
5 of 2018.

6 Q Did you feel that the training was comprehensive?

7 A It was. As I recall, this deck was 70 or 80 slides. What  
8 you're highlighting there was to be consistent with product  
9 label, align to brand strategy, be true and not misleading.

10 Q Did you believe as that result of that training, that you  
11 and the team understood what the sales representatives could  
12 say about insights that they used with the doctors?

13 A Yes, of course, I did.

14 Q Let's look at Exhibit 531. Can you tell us what this is?

15 A This is an email follow-up. We had rolled out engaging  
16 with insights in mid-March. This is toward the end of March --

17 Q Slow down.

18 A This is a week-and-a-half after our initial training.

19 Could you scroll, please?

20 This, once again, was some reiteration to make sure  
21 how they are appropriate, they're on-label, and just  
22 reinforcing what I just said -- that it should be a simple  
23 sentence or two followed by a question, and the PSS should work  
24 on no more than one or two at a time, and, once again,  
25 reinforcement to make sure we are in compliance with brand

S. DiNunzio - X

1 strategy and to have its intended impact.

2 Q The next paragraph.

3 A Would you like me to read it?

4 Q Explain what it is.

5 A It is just sharing that, yes, that a sales professional  
6 should work on one or two insights at a time, and there are  
7 many sources of local insights, including HCP offices,  
8 pharmacies, articles, institutions. Then I shared an insight  
9 that I found that morning in a book called *The COPD Solution*,  
10 which is a wonderful book. And the insight is simply this --  
11 you might say, "Doctor I'm not sure you are aware that your  
12 airway diameter is reduced by half its normal size. When your  
13 airway diameter is reduced by half its normal size, it becomes  
14 16 times more difficult to breathe. Doctor, would you mind  
15 sharing with me what that experience might be for a patient?"  
16 It is just as simple as that.

17 Q Going back to the email.

18 A I asked the DSMs to review the training deck and make sure  
19 they were familiar with everything in it.

20 Q And let's go to the next page. Did you send the slides to  
21 the team that you received from the training department?

22 A I did.

23 Q I'm going to skip through -- we are not going to go  
24 through all 81 pages of the deck. I am going to focus on a  
25 couple of pages.

S. DiNunzio - X

1           This is page 31 of the deck. It talks about the  
2 guiding principles of insights.

3           Is this your understanding of what insights were?

4     A     Yes, it is.

5     Q     And this is what you forwarded on to the team; is that  
6 right?

7     A     That's right.

8     Q     Exhibit 544. Text No. 706. Looking at text No. 706, is  
9 this a text that you sent to your team?

10    A     Yes, it is.

11    Q     What are you telling them here?

12    A     In this text I'm sharing that -- this is right after we  
13 had rolled out the initiative; that we're getting a lot of  
14 positive feedback; it's great news, but there is also some  
15 confusion and concern. It's a new skill, so I am definitely  
16 not surprised. I wanted to get the team together again the  
17 next day to make sure we were on the same page to make sure  
18 what is an appropriate insight and how to use it without  
19 causing distraction and that my goal was to use this new skill  
20 in a way that didn't put anyone at risk.

21    Q     Now, did these local insights have to be approved by the  
22 AstraZeneca compliance department or the brand department?

23    A     No, they didn't, as long as they met with the standards of  
24 aligning to the label, aligning to brand strategy, being true  
25 and not misleading.

S. DiNunzio - X

1 Q Do you know why they didn't have to be approved?

2 A I wasn't part of that decision. My guess is that they  
3 truly were locally created insights, and they trusted -- as  
4 long as people followed the principle -- that they would be  
5 compliant.

6 Q So when you rolled out these insights, was it typical for  
7 team members to share these insights with each other as they  
8 came up?

9 A Sometimes they did, yes. For example, if you had a sales  
10 professional who had a new insight, and it was landing really  
11 well, it wouldn't be uncommon for that sales professional to  
12 share with their peers.

13 Q You talked about earlier September being an important  
14 time -- a September to remember?

15 A Uh-huh.

16 Q Kids going back to school and germs everywhere. In August  
17 and September, did you send an email to Ms. Ivie in which you  
18 asked Ms. Ivie if representatives could email their insights to  
19 each other? This is Exhibit 31. I think we are going to have  
20 to go to the end and work our way back.

21 A I was going to ask to scroll back. Thank you.

22 Q Do you see that email there, "Hi, Suzanne." What are you  
23 asking Ms. Ivie to do there?

24 A So if you scroll down to the bottom, the initial email is  
25 from Kateri Broussard, one of the regional training

S. DiNunzio - X

1 specialists. This is when we were preparing for our "September  
2 to Remember" initiative. These are examples of really great  
3 insights. They are simple, clean. We have great references  
4 here. We hadn't been regularly engaging in emailing insights  
5 before. This was about six months before we rolled out the  
6 initiative. So I wasn't asking Suzanne if they were compliant.  
7 I knew they were compliant. I was asking her, "What are your  
8 thoughts about emailing these," because we had so many  
9 conversations about that. So that's why I reached out to her  
10 as my compliance champion.

11 Q And then she forwards this email it to Teresa Grey in the  
12 compliance department?

13 A Uh-huh.

14 Q Were you surprised she did that?

15 A No, not at all. If Suzanne had any questions about  
16 compliance, Teresa is a great person to reach out to.

17 Q So it was appropriate for her to do so?

18 A Certainly.

19 Q Then we will get to Teresa Grey's response.

20 A So Teresa --

21 Q She states what she understands you're asking, correct?

22 A Yes.

23 Q What is that?

24 A Let's see here. She is really reiterating, reaching out  
25 by email, that the email would be for internal distribution

S. DiNunzio - X

1     only.

2             And then if we could scroll a little bit.

3             Then she goes over the guiding principles that you  
4     have seen multiple times: Be consistent with product label,  
5     align to brand strategy, be true and not misleading.

6     Q     Slow down.

7             And then at the end of the email here she talks about  
8     something called CL&D. What's that?

9     A     That's our training department.

10    Q     What is she suggesting here?

11    A     She was suggesting that myself or Suzanne reach out to  
12    some individuals in our training department for additional  
13    training. My perspective is that we had undergone extensive  
14    training. My question wasn't about people understanding  
15    whether they were compliant. My question really was about are  
16    we comfortable emailing them at this point -- I am sorry --  
17    CL&D training was not necessary.

18    Q     So you forwarded that email on. Ms. Ivie, writes to you,  
19    "Thanks, Teresa" -- copying you -- saying that she has reached  
20    out to the training department, correct?

21    A     That's right.

22    Q     Then you say, "Let's pause on this, Suzanne. There is no  
23    need to get CL&D involved."

24             What did you mean by that?

25    A     I didn't perceive there was a training need. We had

S. DiNunzio - X

1 undergone the training about six months previously. We were  
2 much more comfortable with the skill. My question was about  
3 emailing insights.

4 Q Was there anything in that email chain that suggested to  
5 that Ms. Ivie was accusing you of doing anything wrong?

6 A No, not at all.

7 Q Was there anything in the email chain that suggested to  
8 you that Ms. Ivie was making a complaint about you?

9 A No, not at all.

10 Q Did you say anything to Ms. Ivie about removing her from  
11 her compliance role because of this email chain?

12 A The first time I spoke to Suzanne about removing her from  
13 any roles was at her year-end review on December 19th.

14 Q As far as you know, did any of the representatives who  
15 worked for you ever give any insights that were improper?

16 A Not that I'm aware of, no.

17 Q And who would be the best people to know -- to supervise  
18 in effect the sales representatives as they gave these  
19 insights?

20 A The best person to supervise the sales professionals is  
21 the DSM. For every field coaching report they fill out, there  
22 is a box that they have to check that everything they've seen  
23 is in compliance. They are supposed to meet with the sales  
24 professionals regularly. They observe a large number of  
25 interactions with healthcare providers. So they would be the



S. DiNunzio - X

1 best individuals to inspect.

2 Q Now, Mr. Oswald asked you some questions about the CIA.

3 A That's right.

4 Q Was that a product that you were involved with at all?

5 A No, it wasn't.

6 Q Did that CIA have anything to do with you?

7 A It did not.

8 Q Or any of the teams that you were responsible for?

9 A No.

10 Q Did it have anything to do with you at all?

11 A No.

12 Q One of the questions that came up was about who employees  
13 could make complaints to. I think you said they could make  
14 complaints to you; they could make complaints to Matt Gray  
15 about you. Were they free to go to human resources and other  
16 avenues of complaints that they wanted?

17 A Yeah. They could go to human resources or compliance  
18 directly. If they felt that they wanted to be anonymous, they  
19 could go to the human resources hotline or compliance hotline.  
20 There are many, many avenues to share concerns at AstraZeneca.

21 Q Now, we had a brief discussion about a bathroom --

22 Ms. Ivie taking a phone call in the bathroom. Can you tell us  
23 what that was all about?

24 A Sure. We were really fortunate that our executive vice  
25 president of North America, a gentleman named Ruud Dobber, had

S. DiNunzio - X

1 asked to join a regional call. It was really unusual. It was  
2 a great opportunity. He is a very busy man. You don't often  
3 get time with the executive vice prez.

4 Now, that came along with a lot of strings. I had to  
5 work with corporate affairs individuals. I had to fill out a  
6 form so he could come to the call, knowing some facts about the  
7 region. We had to submit questions in advance. So there was a  
8 lot of legwork to pull off this call.

9 But it was really exciting. Ruud Dobber is  
10 incredibly good at what he does. We are all incredibly proud  
11 of him. Having him on a call in the region was exciting. It  
12 was also pretty high pressure. As you can imagine, I wanted  
13 the region to look really nice in front of Ruud.

14 So Suzanne and I had spent some time earlier that  
15 day. We'd driven back to the hotel where we were staying. I  
16 went into my hotel room. I wanted to be in control of my  
17 environment. I would not have a call like that in a lobby, not  
18 knowing that a big group of people could walk in and disrupt  
19 the call. I was the facilitator of the call. I needed to  
20 focus and make sure it went well.

21 So I was up in my room by myself. Suzanne opted to  
22 stay down in the lobby. I wasn't with her during that time.  
23 If she chose to go in to use a public restroom, that was her  
24 choice. I didn't direct her or guide her to do so. As soon as  
25 the call wrapped up -- and it was highly successful. It really

S. DiNunzio - X

1 went well. I went back in the elevator, back down to the  
2 lobby. Suzanne said that it was a very nice call, and that was  
3 that.

4 Q Let me ask you about couple of the witnesses that will be  
5 in this case. One is Aaron Griffith.

6 Did you promote Aaron Griffith?

7 A I didn't officially promote him. He became interim  
8 district sales manager underneath me. That was a temporary  
9 role.

10 Q Did he work for Ms. Ivie?

11 A He did.

12 Q Does his age have anything to do with you making him an  
13 interim DSM?

14 A No. He's a very talented individual who had earned the  
15 opportunity.

16 Q Did Ms. Ivie support this promotion?

17 A Initially, yes.

18 Q Is he still with the company?

19 A He is.

20 Q How is he doing?

21 A He is doing exceptionally well.

22 Q The next witness I want to talk about is Linda Truax. Who  
23 is she?

24 A She is a sales professional in the Portland district. She  
25 reported into Larry Hinson.

S. DiNunzio - X

1 Q Did she ever report directly to you?

2 A She did not.

3 Q Do you have much interaction with her?

4 A Very little. I had a couple of conversations. I saw her  
5 in a group setting once or twice, but I did not regularly  
6 interact with Linda Truax.

7 Q Was it your understanding that she retired from  
8 AstraZeneca?

9 A Yes, it is.

10 Q And had she announced her retirement long before she  
11 actually left?

12 A I think that she had made her plans pretty clear. We  
13 celebrated her retirement in the region together with a really  
14 nice email talking about her accomplishments over the years and  
15 what she was looking forward to. We shared in -- retirement is  
16 a happy thing. We shared in her happiness for sure.

17 Q Did you have anything to do with her decision to retire?

18 A Not that I'm aware of.

19 Q When she retired, did you interview her and then send an  
20 email about her to the team?

21 A I did.

22 Q Did you also prepare a video for her 30th anniversary?

23 A I did. We were at a directors meeting. 30th anniversary  
24 is a big deal, and it should be celebrated. All the directors  
25 got together and created a video for her and posted it.

S. DiNunzio - X

1 Q Mr. Hinson is another witness in the case. Did Mr. Hinson  
2 work for you?

3 A He did.

4 Q How was his performance?

5 A Larry's performance was inconsistent. If you looked back  
6 at the last six years of performance, he had four years of poor  
7 performance and two years of good performance. So we believed  
8 that great leadership can deliver consistent performance over  
9 time, and his performance on the whole was poor.

10 Q Did he resign?

11 A He did.

12 Q How did that come about?

13 A I had some concerns about Larry, and we had a discussion  
14 about possibly putting him on a plan. I had three very  
15 specific concerns about him. He at that point -- I wasn't  
16 involved in these conversations, so it is hard to speak to --  
17 he asked for a mutual consent, which I'm not even really sure  
18 what that is. I'm not in human resources.

19 Q Last topic. Training on discrimination and retaliation.  
20 Have you received it?

21 A I have.

22 Q How often?

23 A Annually.

24 Q What did you learn was the company policy on  
25 discrimination and harassment?

S. DiNunzio - ReD

1 A That we don't stand for it.

2 Q Did you ever discriminate against Ms. Ivie because of her  
3 age?

4 A I did not.

5 Q Did you retaliate against her for making complaints about  
6 you?

7 A I did not.

8 Q Did you retaliate against her because she took a leave of  
9 absence?

10 A I did not.

11 MS. RIECHERT: No further questions.

12 THE COURT: Thank you. Redirect.

13 REDIRECT EXAMINATION

14 BY MR. OSWALD:

15 Q Ms. DiNunzio, you stated that you raised concerns directly  
16 with Suzanne about her field coaching activities in June of  
17 2018 and again in September of 2018, right?

18 A I raised concerns with her directly in June. In  
19 September, we had a leadership meeting where we talked about  
20 the components of the successful field ride. So that was not  
21 one-on-one directly with Suzanne.

22 Q But you did in June of 2018, right?

23 A That's right.

24 Q Now, the 2018 performance review we looked at before,  
25 Plaintiff's Exhibit No. 15, which you wrote, right?

S. DiNunzio - ReD

1 A I did.

2 Q Did not discuss field coaching reports nor was it -- well,  
3 it doesn't discuss any field coaching reports at all, right?

4 A That's correct.

5 Q And you reviewed expense reports when you got them, at  
6 least once a month, right?

7 A That's right.

8 Q For accuracy, right?

9 A I reviewed them for compliance.

10 Q Okay. And you reviewed the DSM coaching reports on a  
11 monthly basis, right?

12 A Yes. If they came in, I would look at them.

13 Q And if you saw a problem with either the field coaching  
14 report or expense report, you would address the problem  
15 immediately, right?

16 A I would. As I mentioned before, the lens through which I  
17 approve expense reports was through the compliance. It was not  
18 through a budget or a travel fund.

19 Q If you see a problem with the field coaching report, you  
20 address the problem immediately, right?

21 A I conduct periodic reviews of field coaching reports. I  
22 don't read them all the time. I would read them every quarter,  
23 every six months. Naturally, yes, when I find any issues, I  
24 address it immediately, and not just with Suzanne but other  
25 DSMs as well.

S. DiNunzio - ReD

1 Q I want to make sure. In fact, you reviewed the DSM  
2 coaching reports on a monthly basis?

3 A I did not. I reviewed the report on the DMS activity. It  
4 is a simple spreadsheet.

5 Q Would you take a look at your deposition for me, page 27.

6 A I'm there.

7 Q Let's go to line 12. Do you see that?

8 A I do.

9 Q Does that help refresh your recollection of how often you  
10 got your field coaching reports?

11 A What I said was accurate. There is a report that the  
12 directors review monthly that reflect the activity. It is  
13 called the DSM field coaching report, and I reviewed that  
14 monthly. That's different than reviewing field coaching  
15 reports.

16 Q Well, it goes on to say, "If you see a problem in the  
17 field coaching report, do you address it immediately or what's  
18 your practice?

19 "ANSWER: I do. I address it."

20 Did I read that correctly?

21 A Yeah. What I was referring to was the monthly DSM  
22 coaching report, which I sent consistent emails about.

23 Q Now, you mentioned before that Suzanne was involved with  
24 three to five extracurricular activities that you removed from  
25 her, right?



## S. DiNunzio - ReD

1 A Uh-huh.

2 Q The compliance -- you didn't consider the compliance  
3 champion role/responsibility to be extracurricular, did you?

4 A I did. Our obligation is to have one compliance champion  
5 per region, and I gave that to another individual.

6 Q Who did you assign that to?

7 A To Andrew Maratas.

8 Q The person who had been on the performance improvement  
9 plan?

10 A There were no issues with compliance with Andrew.

11 Q No issues. He was perfectly compliant?

12 A Yes. This is a very compliant company. Yes, he was  
13 having some leadership and coaching issues. He didn't have any  
14 responsibilities at the time, and so it made sense.

15 Q On 6-15, this is where you had this meeting with Suzanne  
16 where you talked with her, and you showed us some notes?

17 A That's right.

18 Q There is no email memorializing that conversation with her  
19 at all, just your notes of what happened?

20 A That's correct. I regularly take notes.

21 Q Now, during that conversation you never asked Suzanne  
22 whether Suzanne was spending more virtual coaching -- more time  
23 virtual coaching than in field coaching, right?

24 A I did not. I reviewed our expectations with her.

25 Q None of Suzanne's sales representatives ever complained to

S. DiNunzio - ReD

1 you about Suzanne's performance, right?

2 A Not that I'm aware of.

3 Q The only DSM you discussed Suzanne's performance with was  
4 Chris Thomsen, right?

5 A I didn't discuss performance with Chris. I had a very  
6 brief conversation, likely five minutes, around her coaching  
7 activities, as he had previously reported to Suzanne.

8 Q You did not discuss Suzanne's performance or coaching  
9 activity with any of her DSMs -- other DSMs other than  
10 Chris Thomsen, right?

11 A To the best of my recollection, yeah.

12 Q You've never fired a DSM before Suzanne Ivie, right?

13 A I did not terminate Suzanne Ivie, and, no, I have not.

14 MR. OSWALD: Thank you.

15 THE COURT: Thank you. Anything further?

16 MS. RIECHERT: Nothing further.

17 THE COURT: Thank you. May this witness be excused?

18 MR. OSWALD: Yes, Your Honor.

19 THE COURT: Thank you very much.

20 Call your next witness, please.

21 MR. OSWALD: Linda Truax, Your Honor.

22 THE COURT: Please step forward, ma'am. Hold right  
23 there for a second. We are cleaning the witness box.

24 Thank you. Please have a seat.

25 THE WITNESS: May I take my mask off?

L. Truax - D

1 THE COURT: You may.

2 THE CLERK: Would you raise your right hand, please.

3 (The witness was duly sworn.)

4 THE CLERK: Okay. Be seated please. Would you  
5 please state your name for the record, spelling your last.

6 THE WITNESS: Linda M. Truax. T-R-U-A-X.

7 THE CLERK: Thank you.

8 DIRECT EXAMINATION

9 BY MS. CHAMBERS:

10 Q Good afternoon, Ms. Truax. Can you please introduce  
11 yourself to the jury.

12 A Yes. Good afternoon. My name is Linda Truax. I am a  
13 retired senior executive pharmaceutical sales specialist. I  
14 worked with AstraZeneca for 29 years and three months. I  
15 retired December 1, 2018. While I worked for AstraZeneca, I  
16 lived in Ashland, Oregon. So I had the southern Oregon  
17 territory, which encompassed -- at various times territories  
18 change -- but I covered from Ashland as far north as Salem to  
19 Bend for a couple of years. I had Klamath Falls and Lakeview,  
20 if you have ever been out that way, and I covered the coast  
21 from Brookings up to North Bend.

22 Q Who was your first-line supervisor before you retired?

23 A My first-line supervisor was Larry Hinson, and I had him  
24 for a number of years, and I had him several times over my  
25 career with AstraZeneca. And then the last -- oh, I think from

L. Truax - D

1 June until I retired, I had an interim DSM.

2 Q And who was that?

3 A Aaron Griffith.

4 Q And Larry Hinson reported to Stephani DiNunzio?

5 A Correct.

6 Q And your title is a PSS; is that right?

7 A Yes. It's a fancy name. It is pharmaceutical sales  
8 specialist. But as I explain to my friends and family, it is  
9 really a sales representative.

10 Q And you report to DSMs; is that right?

11 A Correct.

12 Q Were you ever recognized for successful performance at  
13 AstraZeneca?

14 A I have to tell you, I really had a truly wonderful career  
15 at AstraZeneca. Yes, I was acknowledged for sales performance.  
16 I earned a lot of different awards, but probably the ones I'm  
17 most proud of is -- although I joined AstraZeneca in 1989, it  
18 wasn't until as Astra merged with Zeneca in 2000 that -- we had  
19 award trips for the highest performance. So the top 5 percent  
20 of the sales force was a COE, or a Circle of Excellence winner.  
21 I'm really proud to say that in my 29 years, though it was only  
22 available for 17 years or 18 years, I won five times. I think  
23 there was only one other representative that won five times.

24 Q Did you ever get asked compliance-related questions by  
25 other managers or employees at AstraZeneca?

L. Truax - D

1 A Yes. I actually had quite a good knowledge of our  
2 compliance at AstraZeneca. One of the things I was most proud  
3 of -- what I did at AstraZeneca -- was I did a review of an  
4 article teleconference. I used to do it on voice mail, but  
5 that came to an abrupt end. Then a few years later our policy  
6 changed, and I was able to do a review of an article on a  
7 teleconference. I used to do it on voice mail. But compliance  
8 said we couldn't do that anymore. So I did it live on a  
9 teleconference.

10 Because we review articles that had not gone through  
11 the approval process, I had a very strong knowledge of our  
12 compliance. So I got phone calls from representatives, from  
13 managers, and even the executive business director, Ken Coyle,  
14 who is no longer with the company. He was my executive  
15 business director at one time.

16 Q Just to clarify, you never worked in compliance  
17 department, though, right?

18 A No. I never did work in the compliance department. But I  
19 do have to tell you, one other thing I know was proud of in my  
20 long career at AstraZeneca was we had these awards that we  
21 could give internally to each other. It was called "Being the  
22 Best" award. I did receive an award from the vice president of  
23 sales, a platinum award. These awards had various levels and  
24 they -- years ago they came with a little bit of money attached  
25 to it. I received an award from the vice president of sales

L. Truax - D

1 for my moral leadership and tenacity in working with compliance  
2 on helping the field be able to read articles that had not been  
3 approved through the approval process but were designed to be  
4 able to help us be stronger, better pharmaceutical  
5 representatives.

6 Q Switching topics a little bit, what is a CIA?

7 A A CIA is a corporate integrity agreement. It is a serious  
8 option that the Office of the Inspector General and the  
9 Department of Health and Human Services has as an option to  
10 help resolve allegations of healthcare fraud or healthcare  
11 abuse. It is really designed to be able to help a company  
12 return to a more compliant environment.

13 Q Are you aware if AstraZeneca entered into a CIA during  
14 your 29 years there?

15 A Before I answer that, is this water for me? It hasn't  
16 been opened.

17 THE CLERK: It is up to you.

18 THE WITNESS: Thank you.

19 You asked me if I had been in a CIA?

20 BY MS. CHAMBERS:

21 Q If AstraZeneca had entered into a CIA.

22 A Yes. The reason I said if I was in a CIA is because  
23 AstraZeneca did go into a CIA.

24 Q Are you aware of what that CIA was for?

25 A Yes. In 2010, AstraZeneca signed a corporate integrity

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1 agreement with the Office of the Inspector General, and it was  
2 for the promotion of a product called Seroquel. Some of you  
3 may have heard of Seroquel, but it is a product indicated for  
4 bipolar and schizophrenia. At that time I had never sold  
5 Seroquel but we were -- the entire company. It didn't matter  
6 if you'd touched that product, you were part of the corporate  
7 integrity agreement. So the company had to set out a new code  
8 of conduct, which every year we had to do an hour of training  
9 on the code of conduct. Then I think we had a three-hour  
10 training on compliance to help us stay in alignment with  
11 federal regulations.

12 Q You mentioned "off-label marketing." What is that?

13 A In our industry, when we go out and talk with physicians  
14 or nurse practitioners or PAs or pharmacists, we have to follow  
15 the prescribing information or what we call on-label. So the  
16 pharmaceutical companies work with the FDA to be able to come  
17 up with a label of how we can promote our product, and it tells  
18 physicians how to use our product. It tells physicians the  
19 prescribing information. It tells the physician about the  
20 evidence, the science to be able to support the indications.  
21 So everything within the label is considered on-label.

22 Off-label is when a representative might talk to a  
23 doctor about a use that the FDA has not approved. Oftentimes  
24 the use of off-label comes from -- oh, maybe medical journal  
25 articles that are written or a doctor may go to a medical

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1 conference and learn about a way to use this medicine that the  
2 FDA has not -- what I always used to like to say is the FDA has  
3 not given us their blessing to talk about it this way. So, as  
4 representatives of the organization, we must follow the label.  
5 We must follow the indications. I mean, I don't mean to sound  
6 so emphatic, but it is really important to do that.

7 Q Thank you. Switching topics again, how do you know  
8 Suzanne Ivie?

9 A I joined AstraZeneca in 1989. Suzanne Ivie was hired, I  
10 think, in 2000 or 2001. She was hired as the district sales  
11 manager in Salt Lake City. I mentioned that I was in the  
12 Oregon district, but we were in the same region. So Suzanne  
13 was hired before we launched our product Nexium. She was  
14 hired. We expanded the sales force. So Suzanne came in in  
15 that time period. I got to Suzanne because, as a leader  
16 in a region, you just get to know other district sales  
17 managers, and I also worked with her in a variety of different  
18 projects.

19 Q Okay. Did you get to form any impressions of Suzanne's  
20 performance?

21 A Well, might I say that I was often envious of the  
22 performance of the Salt Lake City district. So as a region,  
23 you actually have access -- you get to see all of the  
24 performance of the representatives in all of the districts in  
25 your region.



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1           Not now -- but before I left, the last number of  
2 years, we could see the performance of anybody in the country.  
3 But I was mostly interested in looking at my region, because  
4 our markets tend to be the same when you are up here in the  
5 Northwest. We tend to have some of the same markets. So I  
6 just know that Suzanne had a high-performing district. She  
7 also had very little turnover. I don't know about you, but I  
8 can tell when there is very little turn over, it means that  
9 there must be good leadership. I mean, I can see that at my  
10 doctors' offices. If there is a lot of turnover, you think  
11 there is something squirrely going on. But Suzanne had minimal  
12 turnover.

13           The other thing she had that I paid attention to as  
14 a -- at AstraZeneca, we have five different levels of  
15 representatives on what we call the career ladder. So as I  
16 myself moved up the career ladder, I knew who the executive  
17 PSSs were in our region, and I also knew who the senior  
18 executive PSSs were in our region. Suzanne had a very tenured  
19 territory. In our region I think she had the most executive  
20 PSSs and possibly in the country. I would be happy to talk a  
21 little bit more about that, if you'd like. But it really  
22 requires the support of the manager to be able to be promoted  
23 up the career ladder.

24       Q     So we talked a little bit about sales and strong regions.  
25           How are sales goals set up at AstraZeneca?

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1     A     Sales goals trickle from headquarters all the way down to  
2     the territory. So I'm just going to use this as an example,  
3     because I can do the math. So if headquarters sets their sales  
4     goals towards the end of the year, effective in January -- we  
5     were on a calendar year. Let's say they want to grow the  
6     product by 10 percent -- I'm not saying that's what they  
7     wanted, but I could do the math easier in my example.

8                 So they set the goal at 10 percent, and it trickles  
9     down to our areas. We have two different areas, east and west.  
10    Then the executive business director will say, "Well, the west  
11    has some challenges, so we may only give them 8 percent. And  
12    on the east, because I have to return a 10 percent growth, they  
13    are going to have to grow 12 percent."

14                So it can just trickle down so that it gets to the  
15    region, and the region has the CBD, the commercial business  
16    director, or as I explained to my friends and family, it is the  
17    same thing as a regional sales manager. They have the ability  
18    to be able to decide what districts -- what their goals are  
19    going to be. Then the district manager can say, "Well, this  
20    territory has better access for their products." So they may  
21    have a bit more. They might have 11 percent. Then another  
22    territory may have 11 percent. Then when it got to a  
23    territory, in this example that didn't have such good coverage,  
24    it might be 8 percent. So just as long as everybody delivered  
25    what the company wanted, what headquarters wanted, which was 10

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1 percent, is my understanding.

2 Now, maybe Suzanne and Larry might be able to speak  
3 differently to that, but that's my understanding.

4 Q Thank you. So I want to talk about DALIRESP. Are you  
5 familiar with that drug?

6 A Yes. I sold DALIRESP.

7 Q So tell me about DALIRESP and how should it be used.

8 A DALIRESP is a treatment for the prevention of COPD  
9 exacerbations in patients with severe COPD that also has  
10 chronic bronchitis and a history of exacerbations. And I know  
11 that's a lot to absorb.

12 Q Okay. Let's break that down a little bit. You talked  
13 about exacerbations. What is an exacerbation with someone with  
14 COPD?

15 A COPD is Chronic Obstructive Pulmonary Disease. We people  
16 might call it lung disease. In medicine, they call it  
17 pulmonary, and so it is Chronic Obstructive Pulmonary Disease.  
18 It can be very debilitating. Exacerbations -- almost all  
19 patients who have COPD are going to have symptoms. Obviously  
20 they are going to have symptoms. The most common symptom in  
21 COPD is cough, wheezing, shortness of breath. And there is one  
22 other, but I can't remember it right now. The main thing is  
23 they really can't catch their breath.

24 So an exacerbation is a worsening of that condition.  
25 So if there is somebody that develops inflammation, maybe if

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1 they are around their grandchildren that bring home germs, then  
2 they may pick up some of those germs. If it exacerbates the  
3 disease, they have a hard time breathing, and sometimes they  
4 end up going to the hospital.

5 Q I think you mentioned this. There was some talk about  
6 primary and secondary treatment. How should DALIRESP be used?

7 A Okay. This is one of my favorite things to kind of  
8 explain -- primary prevention and secondary prevention. Those  
9 of us that don't really have a medical background might say  
10 first event or second event, but in medicine they can't say  
11 that. It is a primary prevention or secondary prevention.

12 So primary prevention would mean that you prevent the  
13 first event. You might recall, when I explained what the  
14 indication was for DALIRESP, it is for patients that have a  
15 history of exacerbations. So since they've already had events,  
16 this is now going to prevent a second, or a secondary  
17 prevention. So secondary prevention is for somebody that has  
18 already had the medical problem. So exacerbation in this case  
19 would be the secondary prevention of an exacerbation.

20 Q Did Suzanne ever come up to about concerns regarding  
21 DALIRESP?

22 A Yes. So Suzanne was not my manager, but we knew each  
23 other, and we would see each other at meetings. We talked on  
24 teleconferences. When I had a problem, I would text her and  
25 say, "Hey, Suzanne, when you get a chance, please call me." So

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1 because I was so involved in compliance, and she was our  
2 compliance ambassador or leader for our region, if she was  
3 flummoxed by something, she would reach out to me. So she did  
4 reach out to me that she had received -- I think it was an  
5 email or some communication. We had a very aggressive goal for  
6 DALIRESP. And in order for us to make our goal of DALIRESP, we  
7 were going to have to promote it to prevent the first or  
8 primary intervention, the first exacerbation in patients that  
9 have mild disease. I said that is -- "No, you can't do that.  
10 That's not what the indication is, and we cannot do that." It  
11 is an important medicine to take, but it is not a medicine to  
12 take lightly.

13 Q So we talked a little bit about off-label. To clarify,  
14 can't a physician prescribe something off-label?

15 A Based on a physician's training, they do have the  
16 authority to prescribe medication off-label. As a  
17 representative of a pharmaceutical company, it is my  
18 responsibility to speak on-label. So with DALIRESP, since we  
19 are talking about this medicine, it really does help a lot of  
20 patients that have COPD exacerbations. But as we all know,  
21 medicines come with some problems or some side effects. One of  
22 the most common side effects with DALIRESP is diarrhea. We  
23 patients don't like diarrhea. We just don't. Now, my doctors  
24 would say to me, "All of my patients develop diarrhea." I  
25 would say, "In the clinical trials, 9.5 percent of patients

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1 develop diarrhea." And the physician would say, "Well, all  
2 9.5 percent of these patients are in my practice because  
3 everybody develops diarrhea."

4           So physicians really want patients to take this  
5 medicine, and the clinical trials show that when you take  
6 DALIRESP, 9.5 percent of patients develop that diarrhea. But  
7 as they take the medicine, what they find is it abates. It  
8 goes away. So in usually three to four weeks, that will abate.  
9 Once again, we people, we patients, we don't want diarrhea for  
10 three or four weeks.

11           So doctors would go to grand rounds, to medical  
12 conferences, and they would hear -- the medical community was  
13 trying desperately to be able to help these patients get  
14 DALIRESP and take it, because they knew it would prevent an  
15 exacerbation. Incidentally, I didn't share with you that when  
16 you have an exacerbation, you lose lung function that you never  
17 get back. You never get that lung function back.

18           So doctors really want to prevent that. So the  
19 dosing of DALIRESP is 500 micrograms once a day. It is a pill.  
20 You take it in the morning or the afternoon. It doesn't  
21 matter. It's once a day. So doctors started thinking, well,  
22 what if we give 500 micrograms every other day for a month.  
23 Then I would go talk to another pulmonologist, and he would  
24 say, "I start my patients on DALIRESP at 250 micrograms every  
25 day." And I would just say, "You guys are driving me crazy."

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1 You know it is not indicated that way. That's not the  
2 indicated dosing of the medicine." They would go, "Yeah. We  
3 know. We know. But this really does help patients."

4 Now, to the good benefit of AstraZeneca, they  
5 actually did a clinical trial, and the clinical trial was, in  
6 order to prevent the side effect of diarrhea, should we start  
7 at 250 micrograms every other day? 500 micrograms? Excuse me.  
8 250 micrograms every day or 500 every day or just stick with  
9 what the label says, just starting at 500 micrograms. What the  
10 study showed is that taking 250 micrograms every day, so half  
11 the dose every day for four weeks, it helps to prevent the  
12 diarrhea. At that point the body is used to it, and then they  
13 can start taking the full dose. The doctors are happy, and the  
14 patients are happy. But doctors were doing that before the  
15 label changed

16 Q So just to clarify, that example you just provided,  
17 AstraZeneca did a clinical study, and then the FDA approved and  
18 it changes to a label?

19 A Uh-huh.

20 Q Okay. I want to talk briefly about selling with insights.  
21 We have discussed this with some previous witnesses. Did you  
22 use selling with insights as a PSS?

23 A I was a pharmaceutical representative for over 30 years.  
24 The selling model changes all the time. They change the  
25 selling model all the time, and I actually never really

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1 embraced selling with insights. I witnessed too much -- on  
2 that call that I did every week -- that review of an article  
3 call every week. Sometimes the pharmaceutical sales specialist  
4 might go down a crooked road, and sometimes you get into a  
5 little bit of trouble. What I mean by that is selling with  
6 insight is important because it helps -- it helps the  
7 representative know more about the disease state and to know  
8 more about the patients that are taking the medicines.

9 But I just don't think that it's helpful to open up a  
10 conversation with the doctor and say, "You know, Dr. Smith, if  
11 a patient has COPD, they develop such terrible depression and  
12 such terrible anxiety." And I have had representatives call  
13 and say, "Well, I had a doctor say, 'Are you trying to tell me  
14 that SYMBICORT can help with anxiety and depression?'" And we  
15 did not have an indication for that, and so I actually never  
16 really embraced selling with insight.

17 Q Okay. I want to talk a little bit about coaching. You  
18 are a PSS, right, and that means that you reported to a DSM?

19 A Yes.

20 Q So you have had a couple of DSMs during your 30-year  
21 career?

22 A I had more than a couple, but yes.

23 Q So one of them was Larry Hinson, right?

24 A Yes. I had Larry Hinson.

25 Q Larry Hinson liked to coach in the field with you; is that



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1 right?

2 A Yes. I had a lot of different managers. Larry Hinson did  
3 more ride-alongs -- that is what we call it when your manager  
4 comes to spend a day with you; we call it a ride-along -- and  
5 more days in a row with me than any other manager I have ever  
6 had.

7 Q So other than Larry Hinson, how did your other DSM coach  
8 you in your 29-year tenure?

9 A So at AstraZeneca, managers are supposed to spend a  
10 certain number of days in the field. And to be honest with  
11 you, I don't know how many days a year that is. I have never  
12 really heard it. Most managers don't talk about it, but I know  
13 they are supposed to spend a certain number of days in a year.

14 Now, many years ago, before teleconferencing and  
15 everybody having a cell phone, managers would have their phone  
16 calls on Fridays. So they would never be in the field on a  
17 Friday. They would always be in their home office on  
18 teleconferences or one-on-one phone calls with the managers.  
19 But as technology has changed, it kind of crept in where they  
20 had teleconferences every single day. So I might have a  
21 manager who was supposed to do a ride-along, and then they got  
22 all these different teleconferences. So what they would do is  
23 touch base with me during the day or that morning or at the end  
24 of the day, or maybe just reschedule, because they had so many  
25 other responsibilities as a district sales manager.

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1           I had some managers -- it is also kind a strange  
2 thing. At AstraZeneca, like the last couple of months of the  
3 year, they decide to tighten up budgets, and so there would be  
4 no field rides towards the ends of the year, because -- at  
5 least for those of you who know where Ashland is, most of the  
6 managers would fly into Medford and then have to stay overnight  
7 in a hotel. So there was quite a bit of cost associated with  
8 coming down and doing a ride-along. Also, if a snow storm came  
9 up, and they were going to do a ride-along, they would do a  
10 virtual. A virtual is where they would talk to you maybe in  
11 the morning, in the day, and maybe at the end of the today.

12 Q       Based on your experience having in-field coaching or  
13 ride-alongs with different DSMs, did you like them?

14 A       I've always enjoyed seeing my managers. I really like it  
15 when they bring what we call best practices from working with  
16 other representatives in our district. But to be honest with  
17 you, I think when you are a young representative, it is really  
18 important to have your manager with you so you can learn good  
19 behavior and learn how to see other representatives. But for  
20 the most part, it is really like a dog-and-pony show. It is  
21 like a show pony event, because the doctors are on their best  
22 behavior. The representative oftentimes behaves differently  
23 than they would when their manager isn't there.

24           Sometimes the doctor would give you more time, which  
25 they don't tend to give you more time when you are by yourself.

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1 And also, sometimes it makes the doctor uncomfortable when you  
2 are talking to them -- we call it detailing -- when you are  
3 detailing the product to the doctor, and you are using a  
4 visual, and you have a manager standing over your shoulder, the  
5 doctor feels like they are on display as much as the rep is on  
6 display.

7 Q Thank you. I'll conclude with -- so Stephani DiNunzio is  
8 not your supervisor, right?

9 A That's correct.

10 Q Did you have any interactions with Stephani DiNunzio?

11 A I had interactions with Stephani in our region  
12 teleconference calls. When you are down in the Medford area,  
13 leadership tends not to come down there very much. Stephani  
14 would fly to Portland, and then they don't want to have to take  
15 another flight to go down to Medford, and so they would spend  
16 more time in the Portland area.

17 As a senior executive pharmaceutical sales  
18 representative -- there was one other at the time when Stephani  
19 first became my CBD, and that was Jeff Rogers in Spokane. So  
20 Jeff and I were talking about having a teleconference with  
21 Stephani that that we could kind of introduce ourselves and see  
22 what we could do as leaders in the field to maybe help the  
23 region in our leadership capacity, and so we scheduled a  
24 teleconference that way. But ultimately she never used either  
25 one of us in her leadership council teams. The first time I

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1 met her was after Larry Hinson resigned, which was May of 2018.  
2 That was the first time I met her. We never had a meeting in  
3 person.

4 Q Okay. Just quickly, on Aaron Griffith, he was your  
5 supervisor at one point as an interim DSM, right?

6 A That is correct.

7 Q To your knowledge, was Aaron ever trained on DALIRESP?

8 A No. So I was doing a lunch with a PA. I knew that -- and  
9 what I mean by "doing a lunch," it's hard to get a lot of time  
10 with our providers. They are so busy. You have been to the  
11 doctor and have seen how busy everybody is. So we would have  
12 the ability to bring in a modest lunch so that you can talk  
13 with the provider with a meal. I knew this particular PA had a  
14 population that had a lot of COPD patients, and I also knew  
15 from previous conversation that he was initially very excited  
16 about DALIRESP, when it came to market. But with the diarrhea,  
17 he just stopped using it. So when the dosing changed, I  
18 scheduled a lunch.

19 When Aaron and I -- usually what happens when you're  
20 managers, you talk to doctors, you detail them, you share  
21 information. Then when you leave, they talk to you about what  
22 you could have done better or if you did well. Hopefully they  
23 share what you did well and what you could do better. They are  
24 supposed to share two good and one correction.

25 So when we were walking out, he said, "You really

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1 don't need to go into all that detail. That's just too  
2 complicated information to share with doctors." So I said to  
3 him, "Have you been trained on DALIRESP?" Keep in mind he was  
4 my interim manager. He said, "No, I have not been trained on  
5 DALIRESP, but I've done lunches with people who have been  
6 trained on DALIRESP."

7 I said, "My understanding is, according to our  
8 policy, "you are not allowed to give me coaching on a product  
9 that you have not been trained on."

10 Q One last question: In your 29 years at AstraZeneca, have  
11 you heard of anyone being terminated for not performing enough  
12 in-person coaching?

13 A I have never heard of anybody being terminated that has  
14 not had enough in-person. I don't even know how many in-person  
15 days you are supposed to have. I've never heard that.

16 MS. CHAMBERS: Thank you. No further questions.

17 THE COURT: Thank you.

18 MR. McCARTHY: Your Honor, may I approach with  
19 deposition transcripts just in case?

20 THE COURT: Yes.

21 CROSS-EXAMINATION

22 BY MR. McCARTHY:

23 Q Good afternoon, Ms. Truax.

24 A Good afternoon.

25 Q I'm Ryan McCarthy. I'm one of the lawyers for

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1 AstraZeneca. I believe we met about a year ago via Zoom.

2 Reflecting on your career, Ms. Truax, I understand  
3 that you found a lot of success at AstraZeneca as a sales  
4 professional?

5 A Yes.

6 Q And you would agree that part of what it takes to be a  
7 successful sales professional is calling on healthcare  
8 providers, like doctors?

9 A Yes.

10 Q And those are calls that are made in person by the sales  
11 professional?

12 A Yes.

13 Q And as you were working through your career, did you find  
14 your own personal style in how you interacted with healthcare  
15 providers?

16 A I don't really understand that question. I think  
17 everybody finds their own style in every profession that they  
18 have.

19 Q Sure. And you weren't an exception to that?

20 A I would say I was not an exception to that.

21 Q Did it take time to develop your personal selling style?

22 A I can't answer that question. I don't -- did it take time  
23 for me to develop my style? I was a representative for 33  
24 years.

25 Q Sure. Did you feel that your selling skills improved over

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1 the course of your career?

2 A Yes.

3 Q The customers of that sales professional's visit are busy  
4 healthcare providers?

5 A Correct.

6 Q Would you agree that the job of a sales professional  
7 involves trying to build a rapport with the customer?

8 A To the best that one can, yes.

9 Q Did you try to be a good listener to the customer?

10 A Yes.

11 Q Would you try to adapt to different personalities that  
12 your customers might have?

13 A I found that I usually did that.

14 Q Would you try to speak in a compelling way about  
15 AstraZeneca's products?

16 A Could you explain "compelling way"?

17 Q Sure. When you were answering questions -- for example, a  
18 doctor would ask you -- did you try your best to give them the  
19 most complete and helpful information that you could?

20 A I would, based on my knowledge of the physician and how  
21 long of an answer he might want -- he or she might want.

22 Q Right. And that would be based on your personal  
23 interactions. You would know how personalities differ?

24 A Correct.

25 Q Would you agree that the job of a sales professional

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1 requires relating to people?

2 A Yes.

3 Q What some people call emotional indulgence?

4 A Yes.

5 Q And these are face-to-face interactions?

6 A Yes. I only had face-to-face interactions with my  
7 customers. We weren't allowed to make phone calls, or we  
8 weren't allowed to count sending a letter to a doctor.

9 Q So when you are -- let me take you back to the time when  
10 you were calling on doctors. If you put yourself back in the  
11 doctor's office and tried to imagine that interaction, when  
12 you're talking, you're paying attention to the tone of your  
13 voice?

14 A Yes.

15 Q Are you paying attention to your body language?

16 A Usually, yes.

17 Q Are you trying to make eye contact with the customer?

18 A Yes.

19 Q You're looking for nonverbal cues from your customer?

20 A Usually.

21 Q Okay.

22 A And all of this happens like in 10 to 15, 20 seconds.

23 Q Sure.

24 A Yeah.

25 Q But all the things that we have been talking about, you



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1 would agree, are part of selling skills?

2 A Yes.

3 Q They are things that you develop over time?

4 A I'm sorry. Was that a -- I'm sorry?

5 Q Maybe it wasn't clear as a question. I was asking you:  
6 The things that we have been talking about, those are things  
7 that you developed over time over the course of your career,  
8 those skills?

9 A Yes.

10 Q You testified before you were not a DSM, correct?

11 A Yes. I was a senior executive pharmaceutical sales  
12 specialist.

13 Q But am I right that you helped a lot of sales -- other  
14 sales professionals during your time at AstraZeneca as a  
15 mentor?

16 A I was a mentor. I was a class counselor. Class counselor  
17 is when you go back to the training department for two weeks  
18 and work with the new hires. I was a mentor. I was a regional  
19 sales trainer appointed by the regional sales director,  
20 Mike Stratton. I had two of Suzanne's people. I had one or  
21 two from every district in the region. Then -- yes.

22 Q And is one of the things that you did to help others at  
23 AstraZeneca, was one of those things to ride along sometimes  
24 with them?

25 A I would sometimes ride along with them as a regional

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1     trainer.

2     Q     What was your purpose in riding along with them?

3     A     I would find out from the district sales manager what they  
4     wanted me to work on with the representatives. I would share  
5     with the representative this is what their manager had  
6     suggested that I work with them on. I would ask the PSS if  
7     they agreed with that. Then we would work on that together  
8     while I was out in the field with them.

9     Q     So you would actually go into doctors' offices at times  
10    with other sales reps that you were mentoring in this way?

11    A     That's correct.

12    Q     You watched them while they interacted?

13    A     Yes.

14    Q     And you listened to the words?

15    A     Correct.

16    Q     You would give them feedback?

17    A     I would follow the coaching model from AstraZeneca giving  
18    two positives and one thing they could work on.

19    Q     And did you try to be candid in your feedback or advice  
20    that you would give on these trips?

21    A     So by "candid," do you mean would I try to be honest and  
22    forthcoming?

23    Q     Let me rephrase. Would you try to give constructive  
24    criticism? In other words, you mentioned two goods and a bad.  
25    I'm not sure how you said.

L. Truax - X

1 A "Correction," not a "bad." We try not to say "bad."

2 Q Apologies. You would try to give some constructive  
3 feedback or criticism?

4 A Yes.

5 Q Can you think of examples of the types of constructive  
6 feedback or criticism that you might give one of your fellow  
7 sales professionals while you were mentoring in the field?

8 A One of the things that I noticed with a lot of young  
9 representatives is that our company has promotional pieces. We  
10 call them detail pieces. They are designed by the marketing  
11 department, and they have our selling strategy on these pieces.  
12 One of the things that I found throughout our region -- I  
13 reported this to Mike Stratton and also on a call with the  
14 district sales managers -- I noticed that the majority of our  
15 representatives were not using any of these promotional pieces.

16 The other thing we try to do, especially when you're  
17 new or have a new product, is offer the prescribing  
18 information. Now, sometimes you don't always offer the  
19 prescribing, because you have been offering it to them for a  
20 year, and they say, "No." Then they'd say, "If you ask me one  
21 more time, you can't come into my office." So you just try to  
22 offer that.

23 So I would -- I haven't worked with reps in the  
24 field. I have been retired over two years, and I didn't work  
25 in the field with representatives my last probably three or

L. Truax - X

1 four years. I would say that was probably the one that I  
2 worked on the most is the -- we used iPads to have doctors sign  
3 for samples. So most of the young representatives would just  
4 go in with their iPad. They would have nothing else with them.  
5 Then you would go out to their car, and you would find out they  
6 had nothing in their car either.

7 Q Sure. And the observations that you just described were  
8 interactions between the sales professional and the doctor  
9 where you saw the sales professional just there with the iPad,  
10 right?

11 A Correct.

12 Q And you saw they only had the iPad in the car and not the  
13 literature?

14 A Right. And just to be clear, at the time I was a sales  
15 trainer, we didn't have our detailed pieces on the iPad at that  
16 time.

17 Q Sure. And you saw those things because you were in the  
18 doctor's office, and you were in the car?

19 A I saw those things because I was with them when they were  
20 talking to the doctor, and they did not have them.

21 Q Right. And you were in the doctor's office with them, and  
22 were you in the car, and that's how you made those  
23 observations?

24 A Correct.

25 Q Because you were not a DSM, you didn't have to comply with

L. Truax - X

1 any of the job requirements of a DSM, correct?

2 A I would have to say since I was not a DSM, I did not have  
3 to comply. That's correct.

4 Q And that would include the field coaching requirements of  
5 a DSM? Those did not apply to you as a PSS or executive PSS?

6 A I was working as a regional sales trainer, not as an  
7 interim DSM or a substitute DSM or a fill-in DSM. I was  
8 working in the field as a regional sales trainer, which had  
9 different responsibilities than a district sales manager.

10 Q So the requirements in terms of how many field coaching  
11 days a district sales manager would need to complete in a year,  
12 for example, those were not requirements that applied to you  
13 personally during your time?

14 A That's correct.

15 Q And because you were a DSM, you also didn't have to comply  
16 with whatever budget restrictions that might apply to DSMs; is  
17 that correct?

18 A I don't know if I can answer that question. I didn't know  
19 that DSMs had budget restrictions, because I'm unaware of what  
20 their budgets are. I am familiar with what budgets were for  
21 pharmaceutical sales specialists, and so that is something that  
22 I really can't speak to. I wouldn't want to speculate on that.

23 Q So you retired from AstraZeneca around the end of November  
24 2018?

25 A I retired December 1st, 2018.

L. Truax - X

1 Q Thank you. Am I right then you didn't personally observe  
2 any interactions between Stephani DiNunzio and the plaintiff,  
3 Ms. Ivie, in December 2018 or any time after that?

4 A Correct.

5 Q And Ms. Ivie was never your manager or your direct report?

6 A I never reported to Suzanne Ivie as a district sales  
7 manager. As I mentioned, she is in Salt Lake City, and I'm in  
8 Oregon. My part of Oregon was never in her district, and so I  
9 never reported to her. One of the activities that I engaged  
10 with her is she had responsibility for our region under Mike  
11 Stratton and Mike Roth, working with the executive PSSs, to be  
12 able to utilize them and help to develop them.

13 Q I think you mentioned Larry Hinson, who was your DSM for a  
14 period of time. Do you recall whether he was your DSM in 2017  
15 and 2018?

16 A He was my manager in 2017, and he was my manager until he  
17 resigned in May of 2018.

18 Q And you mentioned a couple of other managers -- well, I  
19 should say, first of all, you described Mr. Hinson's coaching  
20 style, which he liked to coach in person?

21 A Larry did like to coach in person. He also sometimes  
22 wasn't able to get down when there were budget cuts, and so we  
23 would be on the phone. Also, I think in early 2017, I think  
24 Portland was hit with a really bad storm. I know down in the  
25 Cascade mountain range we had really heavy snow, and so he

L. Truax - X

1 wasn't able to get down at that time. So he would definitely  
2 always make contact with us on the phone -- definitely.

3 Q You spoke about a couple of other managers who supervised  
4 you and their coaching styles, and you said it was more common  
5 for them to do coaching over the phone, correct?

6 A I didn't mean to imply it was more common. What I meant  
7 to imply is that it was not unusual.

8 Q Sure. But would I be right that those managers would have  
9 been your supervisors before 2017?

10 A Well, Larry was my manager in 2017. I only had one  
11 manager at a time, and so they would have been before 2017,  
12 yes.

13 Q Do you have any knowledge of when AstraZeneca enacted its  
14 current DSM coaching policy?

15 A That is not something that ever cascaded down to me in the  
16 field.

17 Q So you're not sure whether the same requirements applied  
18 to DSMs in 2017 and 2018 as had applied before. Is that fair?

19 A That would be fair, yes. Sure.

20 Q You mentioned Aaron Griffith and some conversations you  
21 had with him regarding DALIRESP?

22 A Yes.

23 Q Do you have new knowledge whether Aaron Griffith at some  
24 point in time was trained on DALIRESP? Do you have any  
25 personal knowledge of that?

L. Truax - ReD

1 A I asked him if he had been trained on DALIRESP. He said  
2 he had not been, and I'm going to take him at his word that  
3 when he coached me on DALIRESP, he got trained on DALIRESP.  
4 Now, whether he got trained after the fact, I do not know that.  
5 Incidentally, when Aaron was my interim sales manager, he also  
6 did virtual ride-alongs.

7 Q Did you make any reports to compliance about  
8 Aaron Griffith?

9 A I did not make any reports. The answer would be no. I  
10 did not. I just told him. I did not report him.

11 MR. MCCARTHY: Nothing further. Thank you.

12 THE COURT: Thank you. Redirect.

13 REDIRECT EXAMINATION

14 BY MS. CHAMBERS:

15 Q Just briefly. So you mentioned that Suzanne Ivie had a  
16 high-performing district; is that right?

17 A Yes.

18 Q And you said -- I believe you said that she developed a  
19 lot of her PSSs to higher-level bands; is that correct?

20 A Yes.

21 Q So would a PSS with a higher-level band, would they need  
22 more in-person coaching as opposed to a less-experienced PSS?

23 A Usually not. Usually a manager doesn't -- if they have a  
24 very experienced, very successful person -- and this applied to  
25 me too -- they just don't spend as much time with you in that



L. Truax - ReD

1 capacity. They may spend time with you in other capacities.

2 One of the other things about helping to develop  
3 PSSs, Suzanne helped develop her people and got them exposure  
4 so they could be promoted on the career ladder. But also, a  
5 number of years ago at AstraZeneca, it was going on throughout  
6 the whole country, our region decided to do a career night. A  
7 lot of our representatives felt they were stifled in their job,  
8 and there wasn't a clear pathway to be able to help develop  
9 them to be promoted.

10 Suzanne, along with Jeff Rogers, who was a manager at  
11 that time, the two of them took the lead for our region to work  
12 with the executive PSSs to roll out career night. And we had  
13 three very successful -- listen, those are not my words. It  
14 was the words of Ken Coyle, who was our executive business  
15 director, who went to all three of them. He said they were  
16 some of the most successful ones he had seen. Suzanne and Jeff  
17 were the leaders of helping to put that together.

18 Q Mr. McCarthy asked you to kind of detail what it is like  
19 to have a ride-along and be in person in the doctor's office.  
20 In your experience, were your DSMs always in person with you in  
21 the doctor's office observing the entire visit?

22 A No. Sometimes a manager would -- as I said, they would  
23 have to fly into Medford. I would give them a schedule who we  
24 would be calling on in the morning or maybe in the afternoon,  
25 and maybe they would not go on some of the calls because they

L. Truax - ReD

1 had teleconferences to do, or they would get a phone call that  
2 they had to take that was important. Sometimes the doctor  
3 really, quite frankly -- there are some doctors out there that  
4 won't allow managers in the office with them. They just won't  
5 allow them in.

6 Q In those situations, would the DSM record that interaction  
7 as an in-person field ride on a field coaching form?

8 A In my experience -- I can speak the field coaching reports  
9 I get. They don't list every call that you made. They  
10 talk generally about what your day was like; if it was  
11 productive; we saw a lot of people. They might comment on one  
12 or two interactions. But they wouldn't list: Dr. A, in  
13 person; Dr. B, I was on a teleconference; Dr. C, wouldn't allow  
14 me in. At that time that was not in the field coaching forms.

15 Q And other than Larry Hinson, did your DSMs, if they were  
16 doing a ride-along with you, would they stay the entire day?

17 A No, not necessarily. It really depended on -- sometimes  
18 they might have a late meeting in Portland, because they might  
19 have business to do and then take a later flight and get down  
20 right before lunch, or if there was a flight that left at  
21 three o'clock, they might take the three o'clock flight, which  
22 means they have to get to the airport at 2:00, because they  
23 don't want to wait around for the six or seven o'clock flight.

24 MS. CHAMBERS: No further questions.

25 MR. MCCARTHY: Just two, Your Honor.



--oOo--

I certify, by signing below, that the foregoing is a correct transcript of the record of proceedings in the above-entitled cause. A transcript without an original signature, conformed signature, or digitally signed signature is not certified.

/s/ Dennis W. Apodaca  
DENNIS W. APODACA, RDR, RMR, FCRR, CRR  
Official Court Reporter

August 10, 2021  
DATE

<b>"ANSWER: [4]</b> 364/20 382/17 384/6 469/18 <b>BY MR. McCARTHY: [2]</b> 490/21 504/1 <b>BY MR. OSWALD: [9]</b> 328/14 338/2 345/12 374/5 378/18 379/1 383/25 388/1 467/13 <b>BY MS. CHAMBERS: [3]</b> 472/8 475/19 501/13 <b>BY MS. RIECHERT: [5]</b> 273/11 344/6 398/15 438/8 452/12 <b>MR. McCARTHY: [5]</b> 438/6 490/17 501/10 503/24 504/7 <b>MR. OSWALD: [17]</b> 328/12 338/1 344/2 344/19 344/22 345/9 372/24 373/7 374/4 383/24 387/19 387/25 398/12 471/13 471/17 471/20 504/12 <b>MS. CHAMBERS: [3]</b> 490/15 503/23 504/9 <b>MS. RIECHERT: [12]</b> 327/22 328/2 337/23 344/4 378/16 378/21 383/23 387/22 438/7 452/2 467/10 471/15 <b>THE CLERK: [6]</b> 345/2 438/5 472/1 472/3 472/6 475/16 <b>THE COURT: [36]</b> 273/3 273/9 327/23 328/3 328/9 337/24 344/3 344/18 344/20 344/23 344/25 345/8 345/10 372/21 373/1 374/1 378/17 378/22 387/21 387/24 398/13 452/1 452/3 452/9 467/11 471/14 471/16 471/18 471/21 471/25 490/16 490/19 501/11 504/8 504/10 504/15 <b>THE WITNESS: [8]</b> 273/8 337/25 344/24 345/6 378/23 471/24 472/5 475/17	<b>1701 [1]</b> 271/10 <b>1717 [1]</b> 271/4 <b>17th [2]</b> 386/14 390/16 <b>17th of [1]</b> 391/25 <b>18 [4]</b> 316/2 387/3 396/10 473/22 <b>186 [2]</b> 383/21 383/25 <b>18th [10]</b> 283/6 283/20 289/15 318/21 330/9 338/13 386/23 412/8 422/12 424/5 <b>18th and [1]</b> 388/3 <b>18th of [2]</b> 316/5 338/5 <b>19 [8]</b> 279/19 279/20 283/17 297/9 382/14 396/17 396/21 440/9 <b>19-year [3]</b> 330/22 341/15 395/3 <b>1900 [1]</b> 271/12 <b>19103 [1]</b> 271/10 <b>192 [1]</b> 382/12 <b>1989 [2]</b> 473/17 477/9 <b>19th [7]</b> 289/14 308/9 387/3 387/11 417/21 440/24 461/13 <b>19th emails [1]</b> 388/3 <b>1:00 [1]</b> 373/4 <b>1st [8]</b> 315/18 441/21 444/12 446/9 450/3 450/8 450/9 498/25
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<b>40 percent [1]</b> 417/20 <b>42 [1]</b> 420/18 <b>42 percent [2]</b> 282/8 420/16 <b>45 percent [2]</b> 282/16 287/22 <b>467 [1]</b> 272/5 <b>47 [1]</b> 398/19 <b>472 [1]</b> 272/6 <b>49 [1]</b> 398/18 <b>490 [1]</b> 272/6 <b>4th [2]</b> 372/16 405/12	<b>9.5 percent [3]</b> 482/25 483/2 483/6 <b>90 [2]</b> 358/20 359/4 <b>90 percent [2]</b> 358/8 359/6 <b>91 [4]</b> 279/11 279/11 291/25 336/9 <b>92 [1]</b> 440/2 <b>94 [1]</b> 299/14 <b>94304 [1]</b> 271/7 <b>95 percent [1]</b> 388/11 <b>97204 [2]</b> 271/13 271/22 <b>99 [1]</b> 342/12
<b>5</b>	<b>A</b>
<b>50 [1]</b> 296/9 <b>50 percent [3]</b> 399/22 448/3 449/17 <b>500 [4]</b> 483/19 483/22 484/8 484/9 <b>500 micrograms [1]</b> 484/7 <b>501 [2]</b> 272/6 278/2 <b>502 [1]</b> 287/5 <b>503 [3]</b> 271/23 289/12 289/12 <b>504 [2]</b> 272/6 408/24 <b>505 [1]</b> 450/19 <b>506 [1]</b> 295/9 <b>507 [2]</b> 412/9 412/9 <b>508 [1]</b> 454/24 <b>509 [2]</b> 440/15 440/16 <b>519 [2]</b> 389/25 427/23 <b>520 [2]</b> 406/13 406/14 <b>522 [3]</b> 402/24 405/11 405/11 <b>523 [1]</b> 433/15 <b>525 [1]</b> 314/13 <b>53 [1]</b> 396/10 <b>531 [1]</b> 455/14 <b>538 [1]</b> 430/9 <b>539 [1]</b> 438/6 <b>542 [1]</b> 435/24 <b>544 [1]</b> 457/8 <b>55 percent [1]</b> 287/23 <b>57 [2]</b> 389/14 427/2 <b>58 [1]</b> 329/4 <b>5:00 [1]</b> 504/18 <b>5th [7]</b> 295/11 316/3 318/20 389/20 389/21 427/18 427/24	<b>Aaron [19]</b> 319/13 319/16 319/20 319/20 320/1 320/13 320/19 321/2 409/24 464/5 464/6 473/3 489/4 489/7 489/19 500/20 500/23 501/5 501/8 <b>Aaron Griffith [1]</b> 501/8 <b>abate [1]</b> 483/8 <b>abates [1]</b> 483/7 <b>Abbonizio [3]</b> 440/8 440/11 440/17 <b>ability [4]</b> 284/12 436/9 479/17 489/12 <b>able [20]</b> 298/8 318/3 318/6 342/20 343/14 425/16 474/6 475/2 475/4 475/11 476/16 476/20 478/22 479/18 480/2 483/13 499/12 499/22 500/1 502/8 <b>abnormalities [1]</b> 422/9 <b>about [340]</b> <b>above [3]</b> 297/14 359/19 505/5 <b>above-entitled [1]</b> 505/5 <b>abrupt [1]</b> 474/5 <b>absence [10]</b> 296/1 296/2 296/5 296/19 297/20 299/9 425/7 425/9 434/6 467/9 <b>absolutely [4]</b> 376/16 394/1 447/2 452/23 <b>absorb [1]</b> 480/11 <b>abuse [1]</b> 475/11 <b>academy [6]</b> 284/20 284/21 290/24 294/13 433/1 433/23 <b>acceptable [1]</b> 414/16 <b>accepted [2]</b> 385/3 385/5 <b>access [13]</b> 296/16 296/20 296/20 296/21 296/25 297/3 297/11 299/9 299/10 336/22 340/24 477/23 479/20 <b>accessing [1]</b> 425/9 <b>accomplishment [1]</b> 395/10 <b>accomplishments [1]</b> 465/14 <b>according [2]</b> 307/16 490/7 <b>account [5]</b> 280/18 282/14 407/9 410/3 419/21 <b>accountable [1]</b> 355/10 <b>accounts [2]</b> 318/2 400/22 <b>accuracy [1]</b> 468/8 <b>accurate [4]</b> 387/10 440/11 440/13 469/11 <b>accusation [2]</b> 446/13 446/15
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<b>6-15 [1]</b> 470/15 <b>6-5-19 [1]</b> 440/9 <b>60 percent [2]</b> 296/9 417/19	

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<p><b>Y</b></p> <p><b>yeah [29]</b> 353/10 355/7 358/23 363/16 367/25 384/15 390/21 393/13 393/24 401/2 402/12 412/10 416/22 418/6 428/1 435/14 438/14 442/10 445/23 450/21 451/20 452/18 453/25 454/19 462/17 469/21 471/11 484/2 493/24</p> <p><b>year [84]</b> 284/19 287/14 288/7 290/20 309/18 309/19 310/1 310/3 318/5 320/14 322/23 327/3 327/4 327/7 330/22 341/15 346/25 349/12 351/11 358/15 359/25 360/4 360/22 388/4 388/7 388/9 388/12 388/22 390/22 390/24 391/10 394/19 395/3 395/14 398/6 400/14 400/17 401/2 412/4 412/11 412/11 412/20 414/19 416/19 416/21 416/22 417/12 417/22 418/18 418/20 419/17 419/23 420/8 421/1 423/23 426/14 428/14 430/18 432/18 432/23 433/25 435/11 442/23 442/25 443/11 447/24 447/24 448/15 450/10 451/7 452/22 461/13 476/8 479/4 479/5 485/20 486/8 486/11 486/13 487/3 487/4 491/1 496/20 498/11</p> <p><b>Year's [1]</b> 312/18</p> <p><b>year-and-a-half [1]</b> 435/11</p> <p><b>year-end [17]</b> 288/7 358/15 359/25 388/4 388/7 388/9 388/12 388/22 390/22 391/10 394/19 412/11 419/17 423/23 432/18 432/23 461/13</p> <p><b>years [39]</b> 273/18 274/4 275/8 309/13 309/15 309/18 323/8 327/18 336/3 357/21 396/18 396/21 398/24 399/25 414/1 420/2 448/3 451/12 465/14 466/6 466/6 466/7 472/14 472/19 472/24 473/21 473/22 473/22 474/5 474/24 475/14 478/2 484/23 486/14 490/10 491/24 496/24 497/1 502/5</p> <p><b>yes [298]</b></p> <p><b>yesterday [5]</b> 275/14 317/25 318/5 339/20 339/21</p> <p><b>yet [1]</b> 426/13</p> <p><b>you [1214]</b></p> <p><b>you'd [3]</b> 345/4 476/6 478/21</p> <p><b>you'll [1]</b> 379/6</p> <p><b>you're [20]</b> 327/8 327/9 359/18 361/22 378/1 379/8 381/9 396/7 416/20 439/2 453/2 455/8 459/21 489/19 493/12 493/12 493/19 496/16 500/17 504/17</p> <p><b>you've [7]</b> 309/14 327/8 350/17 350/22 428/10 454/22 471/12</p> <p><b>young [3]</b> 487/17 496/8 497/3</p> <p><b>your [202]</b> 273/5 274/5 274/21 276/4 280/13 286/18 288/25 293/22 294/12 296/4 297/14 298/16 303/20 308/22 309/23 311/12 312/21 315/20 318/11 319/6 328/13 330/3 330/19 334/24 335/15 335/17 335/25 336/2 336/9 338/4 338/16 342/19 343/13 344/20 344/22 345/3 345/5 345/5 345/10 345/18 346/10 346/17 346/18 346/20 346/21 346/23 347/1 350/3 350/9 352/24 353/5 353/11 354/23 355/22 358/16 359/10 360/24 362/3 363/24 364/14 367/18 368/4 368/17 368/24 369/8 370/25 372/25 373/3 373/8 374/5 375/14 376/3 376/5 376/9 376/13 376/13 377/4 377/11 378/10 378/15 378/20 379/23 380/15 380/19 382/10 383/19 385/20 386/8 387/17 387/21 388/1 388/3 389/17 389/22 390/4 390/10 391/18 391/19 393/23 396/9 396/9 396/12 396/13 396/23 397/4 398/1 398/4 401/18 401/19 401/19 402/8 407/11 407/17 408/3 408/13 408/20 411/22 413/14 422/2 423/16 423/20 424/6 427/6 427/14 428/10 432/6 432/17 437/6 437/7 437/21 439/22 440/11 443/20 447/1 450/7 450/20 452/14 453/1 456/11 456/12 457/3 457/9 459/7 465/7 469/5 469/9 469/10 469/18 470/19 471/18 471/20 471/21 472/2 472/5 472/5 472/22 473/6 475/14 477/25 485/20 486/3 486/7 486/8 487/12 487/18 488/4 488/8 489/4 489/7 490/10 490/18 491/2 491/13 491/14 491/21 491/25 492/1 492/12 492/18 492/22 493/12</p>	<p><b>Z</b></p> <p><b>Zeneca [1]</b> 473/18</p> <p><b>zero [1]</b> 352/14</p> <p><b>zones [1]</b> 312/4</p> <p><b>Zoom [1]</b> 491/1</p>